



European Monitoring Centre
for Drugs and Drug Addiction

WORK PROGRAMME

2010



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European Monitoring Centre
for Drugs and Drug Addiction

Cais do Sodré, 1249-289 Lisbon, Portugal
Tel. (351) 211 21 02 00 • Fax (351) 218 13 17 11
info@emcdda.europa.eu • www.emcdda.europa.eu

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2004

2005

2006

2007

2008

2009

2010

2011

2012

2013

2014

Section I

Introduction and summary of key outputs

Context

The 2010 work programme is the first to fall under the EMCDDA's new three-year strategy and work programme (2010–12). In terms of substantive technical activities, the three-year strategy aims to consolidate the core data sets held by the agency and enable more complex analysis of them. It also scales up and develops some new areas of strategic importance. This means that 2010 will necessarily be a formative and exploratory year during which the structures and approaches needed to deliver the objectives set out in the work programme are put in place.

The three-year strategy reflects the obligations given to the agency in its founding regulation and the priorities outlined in the 2006 recast. It is also sensitive to the needs of the EU drugs strategy and action plan (2009–12). The content builds on the learning the agency has acquired over 15 years of working to collect factual, objective, reliable and comparable information on drug use in Europe. Over this period both the European drug situation and how Member States respond to drug problems have evolved considerably and this is reflected in the strategy with new elements and emphasis.

The purpose of the 2010 work programme is to provide a detailed mapping of the activities the EMCDDA will undertake in 2010. It is an ambitious set of activities but establishing sound methods and approaches early on is necessary if we are to achieve the objectives we have set for ourselves for 2012. Our recent move to central Lisbon, reuniting all agency staff in one premises, will facilitate work processes and collaboration.

The EMCDDA's achievements are only possible through partnership with national data providers and experts as well as with relevant EU bodies and international organisations. It is essential to mention here the importance of the Reitox network of national focal points and national data providers who act as the main interface between national data collection and expertise and the EMCDDA. And we acknowledge that Reitox support and input is a prerequisite for accomplishing a large proportion of the tasks set out below.

The resources required for implementing the 2010 work programme will be provided by the EMCDDA budget for 2010, as adopted by its Management Board, on the basis of the decision of the Budgetary Authority on the EC annual subsidy to the EMCDDA's budget. The EC annual subsidy on which the 2010 EMCDDA budget relies is expected to amount to EUR 15 000 000.

Summary of key outputs in 2010 and their intended audience

Output	Policy	Other target audiences		
		Science	Practice	Citizen
Annual report on the state of the drugs problem in Europe (printed, 23 languages)	x	x	x	x
Selected issues <ul style="list-style-type: none"> • Cannabis market and production • Treatment and care for older drug users • Problem amphetamine and methamphetamine use, related consequences and responses (printed, EN with summary in 23 languages)	x	x	x	x
Drugs in focus policy briefings <ul style="list-style-type: none"> • Meeting Europe's information needs for effective drug policy • Current issues for harm reduction • Policy perspectives on the Internet and illicit drug use (printed, 25 languages)	x			
EMCDDA Monographs Harm reduction: evidence, impacts and challenge (printed, EN with summary in 23 languages)	x	x	x	
EMCDDA Insights New groups of psychoactive substances (printed, EN with summary in 23 languages)	x		x	
EMCDDA Manuals <ul style="list-style-type: none"> • Drug-related infectious diseases (DRID) protocol • Joint manual for national drug information systems • European evidence-based standards for drug prevention (printed, EN)			x	
EMCDDA–Europol joint publications <ul style="list-style-type: none"> • The European cocaine market: current perspectives • The European ecstasy and/or amphetamine market (printed, EN)	x	x	x	x
EMCDDA Risk assessments (if requested) (printed, EN)	x			
EMCDDA website (online, EN, with some multilingual sections)	x	x	x	x
Statistical bulletin (online, EN)		x	x	

Output	Policy	Other target audiences		
		Science	Practice	Citizen
Country overviews (including situation summary, data sheet and barometer) (online, EN and national language)	x		x	x
Drug profiles GHB, ketamine, buprenorphine, methadone, salvia, cathinones (khat) (online, DE, EN, FR)	x	x	x	x
Best practice portal (online, EN)	x	x	x	
Evaluation instruments bank (EIB) (online, EN)	x		x	
European legal database on drugs (ELDD) (online, EN)	x	x	x	
Research resources area (online, EN)	x	x		
Drugnet Europe newsletter (printed and online, EN, 4 issues)	x	x	x	x
General report of activities (online, EN)	x			x

A detailed list of printed and online outputs (showing timing and relation to specific objectives) can be found in section II.2, p. 23.



Section II

Monitoring and reporting on the drugs problem in Europe: selected highlights in 2010

Overview

The EMCDDA's work programme covers the drug situation, drug responses and legal and policy issues. The areas of inquiry for each of these information domains are elaborated fully in the three-year strategy and this 2010 work programme has been structured to facilitate cross references. The tables found later in this section provide a comprehensive list of activities planned for 2010. Approaches vary in different information domains and reflect what is currently feasible at a European level, the stage of development of the work, and the results of a cost benefit analysis to determine priority activities for development.

Among the many tasks to be undertaken, there are three transversal ones that are at the heart of the agency's mandate to provide factual, objective, reliable and comparable information:

1. Producing a state-of-the-art annual review of developments in drug use and responses in Europe located within a broader explanatory conceptual framework (scientific, historical, demographical and socio-political).
2. Maintaining an up-to-date and high-quality online European reference point on drugs.
3. Providing ongoing support to EU institutions and for implementing and monitoring the EU action plan.

A substantial proportion of the agency's resources are invested in achieving these three tasks. In the text below, we highlight some of the developmental activities planned for 2010.

Greater emphasis on ensuring data quality and a more joined up and analytical approach

During the 2007–09 work programme, considerable emphasis was placed on developing a new information management approach. This included establishing a dedicated data management and statistical support team and a new tool for collecting and managing data (Fonte). This improved infrastructure enables us to pay greater attention to internal quality control and checking of data. Activities planned for 2010 include new quality assurance measures and improved routines for ensuring the accuracy of all statistical analysis and data manipulations used for the annual reporting exercise. This will facilitate the continued development of the form and content of the Statistical bulletin where further improvements are planned.

On the analysis side, more generally, priority is given to the cross analysis of indicator data with a number of projects planned that will rely on the synthesis of different data sets. This approach is particularly important for exploiting the key indicators data, where the focus will be on analytical questions relating to: polydrug use, understanding morbidity and improved modelling of problems and consequences. However, it is also relevant for other areas in particular improving analysis of the extent to which service provision is in line with needs. To support this joined up approach we will review our working practices to encourage synergies between working groups.

Developing sound foundations for supporting the establishment of European level guidelines, frameworks and standards

The EMCDDA's regulation and the EU action plan highlight the need for best practice, guidelines and quality standards. Emphasis is therefore given to this topic in our three-year strategy and formative activities on the issue are an important element in 2010. To be accepted, guidelines and standards need to be grounded in scientific evidence and practical programmatic learning. At European level, it is important to respect national competencies and develop frameworks that are sufficiently flexible for the different contexts found across Europe. Partnership and consensus building are therefore key aspects of this process. To ensure effective working, the EMCDDA's activities will be closely synchronised with those planned by the European Commission and will be sensitive to the need to benefit from the ongoing expertise and experiences of Member States in this area. The EMCDDA has the potential to play a key role as a platform for knowledge exchange and for developing agreement on what constitutes effective programming for drug interventions. In 2010, in close collaboration with Scientific Committee members and national experts, we will develop a framework for the development of quality guidelines. To assist this process, a Selected issue will be launched in 2010 to audit existing national guidelines and organisational frameworks in this area. This will be supported by a Reitox academy which aims to provide national focal points (NFPs) with sound methodological support for data collection.

Becoming more sensitive to detecting and exchanging information on emerging trends to reflect the dynamic of the drug problem

Providing timely and objective information on new and emerging drug trends is methodologically and practically challenging but is of growing importance given the increasingly dynamic and fast-moving nature of the European drugs problem. Improving both the sensitivity of information collection and the speed at which findings can be appropriately disseminated are thus key developmental elements in the 2010–12 strategy. In order to provide an improved mechanism to respond to urgent information requests an internal Rapid Response Team (RRT) will be established; this will allow the EMCDDA to better mobilise resources to allow comment on important new developments. The main substantive task for 2010 will be to develop a low-cost and flexible approach to data collection and dissemination. This will include further developing the E-POD case study methodology and a study is planned to spotlight developments occurring in the use and availability of mCPP. Case studies will also consider specific geographical groups and locations that may be important for the diffusion of new patterns of use. In addition, methods will be explored to make better use of qualitative and quantitative information that has already been collected but is not being used. Attention will be given to mapping those substances likely to be relevant to new trends and to exploring what would constitute a monitoring strategy. We will organise a kick-off meeting of the 'trend spotters' group and investigate the potential of this sort of expert network to provide key informant information from different perspectives on areas of interest. Veracity of the information will be established through triangulation of routine indicators, qualitative research and testing against other information sources. Exploratory work will consider the use of undeveloped data sources such as hospital emergencies. Furthermore, our current approach to monitoring the internet will be overhauled and replaced by a more methodologically robust ongoing survey.

Improving the monitoring of drug supply and supply reduction activities

The EMCDDA has always monitored some aspects of drug supply (seizures, price and purity, drug law offences) but to date this area has remained relatively poorly developed in comparison to demand-reduction topics. The three-year strategy gives activities related to drug supply greater prominence and the monitoring framework in this area is widened to include supply reduction activities. In order to use resources efficiently and to obtain maximum synergy from the interaction of different experts, we will organise a mini conference on drug supply and supply reduction activities in 2010. The mini conference will bring together experts who can substantially contribute to the understanding of different aspects of monitoring drug supply and supply reduction. This will serve as a basis for establishing a standing EU reference group. This group will include experts from the law-enforcement field as well as from forensic science and academia. This mix of different types of experts will ensure maximum synergy with the EWS forensic network and trend-spotting activities, and is in line with the EWS objective in 2010 that sets out to better use and develop links with forensic/toxicology laboratory network. This mini conference will also bring together EU experts on retail and wholesale prices. Both these information sources are important to better understand the EU drugs market: with wholesale prices reflecting the interaction between supply and demand of large quantities of drugs, and retail prices reflecting the situation of supply for the drug user at the end of the distribution chain. To bring coherence to the EMCDDA's work in this area, these information sets will be combined with price data in a new Price-purity indicator to be developed in 2010.

Methodological developments

Insightful analysis and reporting is only possible if the information they are derived from is robust. This is why the EMCDDA invests considerable efforts in ensuring that reporting tools are methodologically sound and well structured. This task can be time consuming and complex but is of critical importance and the value of this work can be seen in the fact that many of the approaches developed in Europe are now becoming global standards. In addition to the drug supply and supply reduction area already mentioned, revision and rationalisation work will continue in the area of the key indicators, in particular treatment demand (TDI) and problem drug use (PDU). On the responses side, the rationalisation of tools will continue and attention will be given to improving the quality of expert rating and developing prevention scores. In 2010, the focus will be on critically evaluating and fine-tuning the data collection tools in the area of public expenditure, taking into account the lessons learned from recent data collection activities. As non-labelled expenditure has to date not been included in the standard tables, the EMCDDA will adopt a stepwise approach for establishing a definition of non-labelled estimation procedures that can be used for reporting in this area. This work will begin by discussing modelling techniques for police and court expenditure, and an internal working group will look at the possibilities of using public expenditure as an indicator of policy implementation.

The EMCDDA's monitoring of health and social interventions (ranging from prevention to social reintegration) as well as its monitoring of policies and their implementation has developed considerably over the last 15 years. Developed historically after the epidemiological data sets, the instruments used have now reached a certain level of maturity. However, they have been developed in a bottom-up, vertical way and still do not attain the quality of real key indicators for monitoring the responses side of the drugs problem. For this

reason the existing instruments and procedures will be analysed and revised, where needed, to achieve a more integrated approach in monitoring responses. Internal conceptual work will be followed at a later stage by discussions with external partners and stakeholders.

Increased focus on transversal work

To encourage transversal working, a mechanism for time-limited internal work groups was established in 2008, with the setting up of the EMCDDA's first CUP (cross-unit project) to develop a strategic perspective on supply reduction. The supply CUP will have its terms of reference updated and will be re-launched in 2010 to help coordinate work in this area. The success of this 'CUP' approach has led to its extension and three new CUPs will be established: on prison, treatment and modelling. A detailed set of objectives will be drawn up for each project prior to its launch but some activities are already planned. For example, the modelling CUP will continue to develop the analyses performed by the drug-related infectious diseases (DRID) modelling network as well as developing a proposal for an EMCDDA Monograph on modelling with 2012 as a tentative publication date. The analyses conducted will also develop models to explore the impact of different interventions on the epidemiology of infectious diseases in IDUs. The prison CUP has important challenges to address given the emphasis placed on this topic by the current EU action plan and the limitations of the existing evidence base in this area. In 2010, the CUP will aim to revitalise data collection on responses in prison and re-establish it within the EMCDDA's routine data collection. To achieve this: a prison monitoring expert group will be set up; a review of the prison health database (WHO) will be conducted; and an analysis of alternative data sources, data collections tools and reporting mechanisms regarding custodial settings will be carried out. The CUP will integrate the epidemiological side of monitoring in prisons and review the monitoring of drug use in custodial settings in Europe as well as explore the extent to which mortality of drug users is higher in settings well known for increasing behavioural risks. A CUP on treatment will further develop the EMCDDA's treatment data collection strategy and outcomes will be discussed with NFPs. The CUP will also stimulate the integration of aspects of epidemiology and responses into the agency's monitoring activities. This work was initiated by the transversal working group on treatment set up two years ago.

New analysis and products

The 2010–12 strategy sets out a strong commitment to ensuring that the EMCDDA's work results are accessible to its target audiences and that the agency continues to produce useful and up-to-date publications on key aspects of the European drug situation. The print and web-based publications planned for 2010 (listed in section II.2) include a wide range of products covering all target groups. A scientific Monograph providing a state-of-the-art review of harm reduction practice will be published in the spring along with a policy briefing summarising the current issues for harm reduction. Two market analyses are planned under the EMCDDA–Europol joint publication series, on cocaine and on amphetamine and ecstasy. An Insights publication providing an overview of new psychoactive substances is due for release in June and six new drug profiles will be developed in parallel. A new series of policy case studies which will provide an online reference of interesting examples of national drug policy models will be introduced. These case studies will be produced in close consultation with NFPs and the first issue will be an overview of the Portuguese drug policy, bearing in mind the international interest it has attracted recently. On the treatment side, work will commence on a new two-volume Insights publication that will critically explore pharmacological approaches to opioids substitution therapy.

The EMCDDA's web resources will continue to be developed with a focus on accessibility and timeliness. The topic/theme-based approach adopted for presenting the EMCDDA's work online will be expanded and the publications database will be extended to integrate a broader typology of publications. The European legal database on drugs (ELDD) will be revamped and a module on harm reduction incorporated into the Best practice portal.

Disseminating and valorising EMCDDA findings

As the EMCDDA's role as the reference point on drugs in Europe is affirmed, requests to communicate our results and messages face-to-face — in the form of visits from policymakers, presentations at conferences and talking to the media — are on the increase. Publishing in scientific journals is a growing channel for disseminating results too. Partnership activities with our international, EU and national partners also provide an important outlet for our findings and help to heighten the impact of what we do. In 2010, we will draw up an overview of the many activities that we undertake to disseminate and valorise our findings. We will also review our distribution activities to ascertain to what extent outputs are reaching their intended audience. We will clarify and analyse the type of EMCDDA information that is disseminated by NFPs to their national contacts and discuss with them possible actions and tools for their increased participation in this activity.

II.1 Objectives and activities

1. Monitoring the drug situation

Specific objectives	Main activities
1.1 Tools and processes	
1.1.1 To improve the data management and statistical processes in order to deliver greater efficiency and accuracy to the analysis of quantitative and qualitative data sets.	Introduce system for quality control, audit and backtracking of calculations presented in key EMCDDA outputs.
	Monitor quality and timeliness of reports and provide appropriate feedback and support to data providers.
	Rationalise in-house practice to ensure efficient data processing.
1.1.2 To harmonise and enhance data management and data analysis, including formalising processes, improving computing tools and boosting data quality assurance.	Establish a system of accounting for source and a method of calculation for figures in the Annual report.
	Progressively better integrate qualitative data into the Statistical bulletin.
	Further develop and improve validation of data inputs in and extraction of data from Fonte.
	Develop the data warehouse facility through implementation of SQL programmes.
1.1.3 To produce a state-of-the-art annual review of developments in drug use and responses in Europe located within a broader explanatory conceptual framework (scientific, historical, demographical and socio-political).	Conduct activities necessary to support and implement annual reporting cycles: <ul style="list-style-type: none"> • Production cycle 2010: data processing, cleaning and liaison with NFPs for data requests on all reporting tools. • Production cycle 2011: preparation, revision (where necessary, in consultation with Reitox NFPs) and launch of tools and process for 2011 Annual report.
	Continue to develop quality assurance mechanisms and the feedback process for national deliveries.
	Review and analyse on an ongoing basis information relevant to understanding all facets of the European drug situation.
	Perform analysis, reviews and consultations necessary for producing the Annual report package.

Specific objectives	Main activities
1.2 Key indicators	
1.2.1 To maintain and develop European expert network.	Promote methodology, implementation and development of each key indicator by supporting national experts and NFPs.
	Continue to develop and maintain the key indicator gateway and provide access to implementation tools and supporting material.
	Organise and follow up on key indicator expert meetings.
1.2.2 To increase quality and comparability of key indicators.	Assess the quality of information provided by NFPs.
	Assess the level of implementation of each key indicator and report the progress made.
	Provide targeted support (through Reitox) to countries experiencing technical implementation difficulties.
1.2.3 General population surveys (GPS) To promote the reporting of population surveys and encourage the collection of data on frequency of use.	Review and improve the collection of information and reporting of survey methods.
	Initiate routine data collection on frequency of use and encourage the use of standard approaches.
	Collaborate with ESPAD and HBSC including supporting the analysis of data.
1.2.4 Treatment demand indicator (TDI) To improve the performance of and rationalise the TDI indicator.	Finalise the TDI re-assessment process and draft the proposals for revision.
	Continue implementation of the treatment prevalence project.
	Improve analysis and presentation of data.
1.2.5 Drug-related deaths indicator (DRD) To acquire a better understanding of drug mortality.	Revise the mortality cohort protocol.
	Explore possible use of information collected through special registers.
	Carry out preparatory work on 'Mortality related to drug use; a comprehensive approach and public health implications' (Selected issue in 2011).
1.2.6 Problem drug use (PDU) and revised problem drug use indicator (PDU-R) To continue to develop alternative estimates of problem drug use.	Conduct restricted data collection exercise on problematic forms of cannabis use.
	Encourage and support national validation of short-scale questionnaire on intensive cannabis use.
	Launch feasibility study on comparing direct and indirect effects of intensive cannabis use.
	Continue methodological work on broadened area of intensive, problem and polydrug use.
	Review method to estimate the EU total of problem opioids users and other drug user groups.
	Continue work on methods to estimate incidence of PDU (to be published in 2011).
	Review analytical approaches to estimate problem stimulant use.
1.2.7 Drug-related infectious diseases indicator (DRID) To consolidate the drug-related infectious diseases indicator and improve analysis of trends.	Finalise the update of the DRID protocol (EMCDDA Manual).
	Conduct comparative analysis on HCV trends (scientific paper).
	Collaborate with ECDC, WHO, DG SANCO and other relevant partners.
	Contribute to analysis of factors impacting on HIV and HCV incidence.
1.3 New developmental areas	
1.3.1 To improve data collection and data analysis on polydrug use and vulnerable groups.	Improve data collection and analysis on polydrug use in GPS surveys.
	Conduct a qualitative assessment of children's experiences with drugs (technical paper).
	Improve data analysis on polydrug use among treated patients (scientific paper).
	Improve data collection and analysis of polydrug use related to health consequences.
	Explore drug-related mortality and morbidity among vulnerable groups.
	Explore specific patterns and drug combinations among vulnerable populations.
	Explore options of new data sources (e.g. hospital emergencies) for improving estimations of PDU, assessment of health consequences and assessment of drug trends.

Specific objectives	Main activities
1.3.2 To review the monitoring of drug use in custodial settings.	Monitor drug use in prison (scientific paper).
	Carry out an assessment of drug-related mortality in custodial settings.
1.3.3 To carry out data collection and analysis activities on crime, drug supply and markets.	Finalise guidelines on drug availability in population surveys with additional field test.
	Prepare cannabis market and production Insight (publication in 2011).
	Reconstruct historical data on drug-law offences.
	Analyse information on drug couriers in Europe.
1.4 Analysis and innovative strategies	
1.4.1 To perform combined cross-indicator analysis to ensure maximum value from data available.	Organise a satellite day on treatment coverage: Understanding treatment needs, treatment prevalence, and improving treatment coverage estimates (cross-indicator analysis between TDI, PDU and responses datasets).
	Critically assess methods to estimate European drug consumption (scientific paper).
	Draft a proposal for combined analysis between interventions, PDU, DRD and TDI.
	Conceptualise framework for obtaining an overview of the health consequences of drug use.
	Produce a report on 'Problem amphetamine and methamphetamine use, related consequences and responses' (Selected issue 2010).
	Continue integration of indicator working groups (internal and external).
	Continue analysis on DRID modelling and interventions impact (scientific paper).
	Develop multi-indicator trend analysis and cross validation methods.
1.4.2 To investigate alternative methods of data analysis.	Pilot the decentralised data system (DDS) with an analysis of polydrug use, with reference to the European model questionnaire (EMQ) for guidance on common variable definitions.
	Draft a proposal for analysing incidence of drug use by birth cohort and calendar year.
	Draft a proposal for the analysis of substances by drug users (change in patterns and substance use).
	Further explore the analytical potential of innovative, developing and non-exploited data sources (including in environmental residues).

2. Monitoring responses, interventions and solutions applied to drug-related problems

Specific objectives	Main activities
2.1 Data collection on availability, accessibility and characteristics of responses	
2.1.1 To provide a high-quality and comprehensive review of developments in health and social responses (HSR) to drugs based on methodologically sound tools configured to best fit information availability.	Revise tools according to existing strategy and to respond to new developments.
	Monitor quality and timeliness of reports and provide appropriate feedback and support to data providers.
	Improve the appropriateness of tools for non-opiate related problems.
	Produce online health and social responses intervention profiles.
	Monitor novel and emerging technologies and developments in addiction medicine.
2.1.2 To improve methodological tools and deepen understanding of ratings instruments on provision, availability, accessibility and quality of interventions.	Carry out an assessment of the use and potential of expert ratings on responses to drug use from the perspective of quality assurance in European reporting.
	Revise reporting tools in consultation with Reitox NFPs.

Specific objectives	Main activities
2.1.3 To develop and implement data collection tools in the area of environmental prevention strategies.	Develop methods and protocols (in close partnership with WHO, DG SANCO) to systematically collect and classify information on environmental prevention policies. Encourage more systematic collection of information in this area.
2.1.4 To improve estimates of public expenditure through fine-tuning of the reporting tools.	Review and revise standard table on public expenditure.
2.2 Coherent and systematic set of response indicators in conceptual areas	
2.2.1 To develop a coherent and comprehensive strategy for data collection and analysis of interventions data.	Develop a comprehensive model for responses data collection.
	Analyse, discuss, and revise quality criteria of interventions tools.
	Produce a road map for implementing a revised EMCDDA approach to interventions data.
2.2.2 To introduce an improved set of prevention and early intervention indicators.	Consolidate prevention information on the EMCDDA website.
	Introduce comprehensive intervention profiles integrating the concept of 'prevention scores' (ratings).
	Continue cooperation on innovative methods for analysing prevention trials with international experts and scientists.
2.2.3 To put in place a set of coherent and systematic indicators on treatment availability, provision and coverage, and on social reintegration provision.	Produce an overview of treatment availability in Europe (an update of the 2008 DG SANCO report).
	Review availability of cannabis treatment.
	Review availability of social reintegration with a focus on getting drug users in treatment back to employment.
	Review psychiatric co-morbidities.
	Investigate office-based opioids prescribing.
	Monitor and critically review new and novel approaches to drug treatment (EMCDDA Insights in 2011 to explore developing scientific evidence for new pharmacological approaches for opioid substitution).
2.2.4 To report more systematically on harm reduction responses.	Publish the Harm reduction monograph (Harm reduction: evidence, impacts and challenges).
	Undertake developmental work to define a set of relevant, coherent and feasible indicators on harm reduction.
	Develop online harm reduction profiles.
	Work towards mapping availability and quality of low-threshold service provision (pilot study in partnership with selected NFPs).
2.2.5 To develop a better understanding of the economic analysis of drug markets.	Carry out critical review of existing studies on how economic factors impact on drug markets.
	Conceptualise drug markets profits and costs: the cannabis market.
	Analyse current utility of EMCDDA reporting tools to support economic analysis of drug markets and develop proposal to improve the usefulness of data for this purpose.
2.2.6 To improve data collection and reporting on responses to drug use and on drug users in prison settings.	Review existing EMCDDA sources and tools and refine reporting strategy.
	Review alternative data sources, data collection tools and reporting mechanisms regarding custodial settings.
	Develop a framework and strategy for improved reporting of interventions in the prison setting.

Specific objectives	Main activities
2.3 Analytical framework for new methodological developments	
2.3.1 To further expand cross-indicator analysis between epidemiology and responses.	Conduct literature review on drug policy indexes measuring harm.
	Explore alcohol-cannabis interaction and cannabis-related responses.
	Undertake cross-analysis of epidemiology and response indicators on public expenditure with a focus on prisons.
	Conduct analysis of 'Treatment and care for older drug users' (Selected issue 2010).
2.3.2 To improve estimates of non-labelled public expenditure and develop modelling approaches for the economic analysis of the drugs phenomenon.	Undertake preparatory work on 'Estimating treatment costs' (Selected issue 2011).
	Produce scientific paper on 'Modelling police and court non-labelled expenditure' (2011).
	Produce scientific paper on 'Modelling the impact of economic recession on drug treatment'.
	Produce scientific paper on 'Modelling disorganised crime: the cannabis market'.

3. Monitoring new trends and developments and assessing the risks of new substances

Specific objectives	Main activities
3.1 Implementation of early warning mechanism	
3.1.1 To implement effectively the aspects of the Council decision on the information exchange, risk assessment and control of psychoactive substances (2005/387/JHA) that fall within the remit of the EMCDDA, such as the early warning system (EWS) and risk assessment exercise.	Maintain and further develop the Reitox EWS network.
	Implement efficiently information exchange on new drugs (EWS) – timely notifications on new psychoactive substances, early warnings, substance profiles in the European database on new drugs (EDND).
	Undertake longer-term monitoring of new psychoactive substances.
	Develop tools to ensure implementation of EWS.
	Organise Reitox Academy on new substances (tbc).
	Publish EMCDDA Insights on new groups of psychoactive substances in Europe.
	Assist the Commission and the Council with the assessment of Council Decision 2005/387/JHA.
	Produce EMCDDA–Europol joint report on a new psychoactive substance (if appropriate).
	Undertake risk assessment exercise and risk assessment report (if requested); operationalise the new risk assessment guidelines.
3.1.2 To explore new sources, improve database and enhance forensic science link.	Further develop and promote the European database on new drugs.
	Develop a full set of drug profiles: publication of four drug profiles (GHB, ketamine, buprenorphine and methadone) and preparation of two new drug profiles (salvia and cathinones, including khat).
	Develop a forensic/toxicology laboratory network.
	Develop conceptual approach and methodology for regular audit of the availability of information on drugs on the internet.
3.1.3 To ensure effective information exchange through Reitox EWS, with the EMEA and Europol.	Further develop cooperation, reporting and transparency of the information exchange mechanism.
	Collaborate closely with the EMCDDA's Scientific Committee, Europol and the EMEA (cooperation agreement with the latter).
	Cooperate closely with the European Commission in the framework of risk assessment (if requested).

Specific objectives	Main activities
3.2 Emerging trends	
3.2.1 To further develop an integrated approach for monitoring and reporting on emerging trends, including case study.	Produce mCPP case study (Thematic paper). Produce a conceptual framework and development strategy for data collection, monitoring and information exchange on emerging drug trends.
3.2.2 To pilot new data sources and trend-spotting network.	Conceptualise and implement methodology for monitoring the Internet (linked with Council decision).
	Conceptualise methodology for monitoring the misuse of medicinal products (linked with Council decision).
	Conceptualise and launch internal Rapid Response Team (RRT) mechanism.
	Organise kick-off meeting of the network of 'trend spotters'.

4. Improving Europe's capacity to monitor and evaluate policies

Specific objectives	Main activities
4.1 Monitor and support tools to assess drug policies	
4.1.1 To support Member States in evaluating their national strategies and action plans.	Develop European guidelines for the evaluation of national drug strategies.
	Hold Reitox Academy on the evaluation of national drug strategies.
	Launch series of national policy case studies (first case study Portugal).
	Provide tailored support to Member States if requested.
4.1.2 To support reporting on public expenditure, cost of interventions and cost efficiency.	Organise meeting on cost of drug-related treatment in Europe (comparative analysis).
	Enlarge concept of public expenditure to better support assessment of drug policy.
4.1.3 To increase analysis of national laws and legal basis for interventions and enhance their visibility.	Restructure the European legal database on drugs (ELDD) web area.
	Publish two new topic overviews (treatment alternatives, personal use offences).
	Conduct an analysis of the national legal bases of selected harm reduction responses (for harm reduction profiles).
4.1.4 To provide ongoing support to the EU drug policy review.	Contribute to first progress review in the framework of monitoring the implementation of the new EU action plan.
	Contribute to the evaluation process of EU drug strategy 2005–12 (if requested/appropriate).
4.2 Good practice, guidelines and quality standards	
4.2.1 To further develop and encourage exchange of information on evidence-based interventions.	Further develop the Best practice portal with inclusion of more guidelines for prevention.
	Publish EMCDDA Manual on European evidence-based standards for drug prevention.
	Provide input to and seek synergies with EU-funded activities that cover health and social responses to drug use.
	Prepare a harm reduction module for the Best practice portal (to be released in 2011).

Specific objectives	Main activities
4.2.2 To contribute to the identification and establishment of European quality standards and benchmarks for interventions.	Develop a strategy in close cooperation with relevant bodies (European Commission, Council of Europe, WHO) for identifying and establishing European level guidelines and benchmarks.
	Audit the availability of mechanisms and frameworks for establishing guidelines for drug interventions within Member States (Selected issue 2011).
	Organise a Reitox Academy to provide NFPs with sound methodological support for data collection in this area.
	Develop an online resource of examples of existing national guidelines.
	Establish 'Guidelines group on demand reduction' in liaison with the Scientific Committee, define working practices and launch pilot exercise.

5. Cross-unit projects (CUPs)

Specific objectives	Main activities
5.1 Treatment	
5.1.1 To ensure the EMCDDA's approach to monitoring and reporting on drug treatment is coherent and efficient.	Draft terms of reference and establish treatment CUP.
	Ensure regular internal coordination and information exchange to improve coherence of EMCDDA reporting and analysis on drug treatment issues.
	Further draft the EMCDDA treatment strategy and plan the next steps for its implementation.
	Conduct analysis to improve understanding of estimates of treatment coverage.
	Undertake exploratory activities to improve modelling of the provision of services in the context of estimated needs.
5.2 Drug supply and supply reduction	
5.2.1 To develop and scale-up EMCDDA activities in monitoring drug supply and supply reduction activities and the drug market.	Review and update the terms of reference for the supply CUP.
	Produce conceptual framework for monitoring drug supply and supply reduction in Europe.
	Ensure regular internal coordination and information exchange to support drug supply and supply reduction activities.
	Produce two market analyses in the EMCDDA–Europol joint publication series (cocaine, amphetamine and ecstasy planned for 2010).
	Hold mini conference on the themes of: price, purity, supply reduction activities, forensic science and new trends.
	Establish expert working group(s).
	Reconfigure existing work to provide a new combined price and purity indicator group with subcomponents on retail prices, wholesale, tablet composition and drug purity.
	Undertake preliminary activity to improve reporting on the cannabis products available on European markets.
	Undertake activities to develop reporting tables on the interdiction of production sites (labs and grow sites) in close cooperation with Europol.
	Carry out mapping exercise on drug law enforcement in Europe.

Specific objectives	Main activities
5.3 Prison	
5.3.1 To improve and better integrate EMCDDA activities to report on drug use and interventions within the prison setting.	Draft terms of reference and establish prison CUP.
	Ensure regular internal coordination and information exchange to improve coherence of EMCDDA reporting on issues related to responding to drug use and users within the prison setting and establish links with key external partners.
	Review current data collection activities in this area and develop new strategy and integrated approach.
	Review and re-launch the 'European prison databank' in close collaboration with the WHO, Pompidou Group and other external partners.
5.4 Modelling	
5.4.1 To improve capacity for developing statistical and mathematical models of drug use, consequences and intervention effects.	Draft terms of reference and establish modelling CUP.
	Ensure regular internal working groups and establish links with external key partners.
	Critically audit and review approaches in this area.
	Develop proposal and outline for a scientific monograph on modelling methods to improve understanding of key drug issues (for publication in 2012).

II.2 Outputs

Output	Reference to specific objective in work programme	Notes on timing
Annual reporting		
Annual report on the state of the drugs problem in Europe	1.1.3	First draft: end February Consultation with Member States: April Incorporation of comments: May Translation: June–August Production: September–October Publication: November
Selected issues <ul style="list-style-type: none"> • Cannabis market and production (mandatory) • Treatment and care for older drug users (voluntary) • Problem amphetamine and methamphetamine use, related consequences and responses (voluntary) 	1.3.3 2.3.1 1.4.1	To be launched at appropriate intervals throughout the year taking into account workload of authors. More flexible approach to publication format to be adopted
Statistical bulletin	1.1.1	Consultation with Member States: April Incorporation of comments: May Publication: mid–July
Country overviews (includes situation summary, data sheet and barometer)	IV.2.3	Production: January–May Publication: mid–July
National reports on the drug situation	IV.2.3	Prepared by the NFPs. Delivery to EMCDDA: 30 October. Publication on EMCDDA website: mid–July
Support to the evaluation of the EU drugs action plan (2009–12)		
Contribution to first progress review	4.1.4	Exact nature of contribution still to be defined
Outputs linked to the implementation of Council decision on new psychoactive substances (2005/387/JHA)		
EMCDDA–Europol annual report on the implementation of Council Decision (2005/387/JHA) on the information exchange, risk assessment and control of new psychoactive substances	3.1.1	March 2010
Risk assessment report on a new psychoactive substance	3.1.1	If requested
EMCDDA–Europol joint report on a new psychoactive substance	3.1.1	If appropriate
Review and further development of the European database on new drugs (EDND)	3.1.1	Ongoing

Output	Reference to specific objective in work programme	Notes on timing
Notifications of new psychoactive substances, early warnings; substance profiles	3.1.1	Ongoing
Drugs in focus policy briefings (titles indicative)		
Meeting Europe's information needs for effective drug policy (based on the 2009 EMCDDA conference and priorities for 2010–12)	IV.1.9	February 2010
Current issues for harm reduction (based on Monograph findings)	2.2.4	April 2010
Policy perspectives on the Internet and illicit drug use	3.2.2	October 2010
Monographs		
Harm reduction: evidence, impacts and challenges	2.2.4	April 2010
Insights		
New groups of psychoactive substances in Europe	3.1.1	June 2010
Manuals		
Drug-related infectious diseases (DRID) protocol	1.2.7	April 2010
Joint manual for national drug information systems	III.1.1	June 2010
European evidence-based standards for drug prevention	4.2.1	Autumn 2010
EMCDDA–Europol joint publications		
The European cocaine market – current perspectives	5.2.1	March 2010
The European ecstasy market (Europol)	5.2.1	Autumn 2010
The European amphetamine market (Europol)	5.2.1	Autumn 2010
Thematic papers and technical datasheets		
mCPP a case study	3.2.1	2010
Case studies in national drug policies – Portugal	4.1.1	2010
Children's voices; an insight of drug-related problems among vulnerable children	1.3.1	2010
Drug profiles		
GHB, ketamine, buprenorphine, methadone	3.1.2	Spring 2010
Salvia	3.1.2	June 2010
Cathinones (Khat)	3.1.2	June 2010
Online tools and web-based resources		
EMCDDA public website	IV.1.3	Ongoing improvement of public website accessibility. Introduction of more theme/ topic-based pages. Development of multilingual pages. Create 'Drug use in Europe' signposting page

Output	Reference to specific objective in work programme	Notes on timing
Best practice portal (including maintenance of EDDRA, EIB and PERK, further work on prevention, preparation of harm reduction module)	4.2.1	Ongoing update (treatment and prevention) and launch of new module (harm reduction)
ELDD (European legal database on drugs) and legal topic overviews: <ul style="list-style-type: none"> • Treatment alternatives • Personal use offences 	4.1.3	Ongoing update of website and legal topic overviews
Country intervention profiles (including harm reduction profiles)	2.1.1 and 2.2.2 and 2.2.4	October 2010
General report of activities		
General report of activities including annual activity report of the EMCDDA's authorising officer (for 2009) (EN)	IV.3.5	March 2010 (with provisional accounts) May 2010 (with final accounts)
Drugnet Europe		
Drugnet Europe newsletter (4 issues)	IV.1.9	January, April, July, November
Ad hoc publications		
EU drugs legislation in practice	4.1.4	March 2010

Articles in scientific journals (planned)	Reference to specific objective in work programme
One of the EMCDDA's priorities is to ensure that its findings feature regularly in scientific journals. The list below indicates articles that are expected to be published in 2010. However, please note that the review and revision process can be lengthy and not all submissions are likely to be accepted.	
Comparative analysis on HCV trends	1.2.7
Drug-related infectious diseases modelling	1.4.1
Polydrug use among treated patients	1.3.1
Monitoring drug use in prison	1.3.2
Critical review of methods to estimate the EU total problem opioids users and other user groups	1.2.6
Critically assess methods to estimate European drug consumption	1.4.1
Methods to estimate the incidence of problem drug use	1.2.6
Book chapter: 'Application of illicit drug analysis in the environment'	1.4.2
Modelling the economic impact of economic recession on drug treatment	2.3.2
Modelling disorganised crime: the cannabis market	2.3.2
Polydrug use among school children (2003–07 comparison)	1.3.1

Technical reports, papers and reviews (planned)	Reference to specific objective in work programme
The items listed below include technical reports and internal documents that are produced to take work and concepts forward. The list is indicative as the drafting of technical reports and papers is dependent on factors that are difficult to predict. For example, progress needs to be made in technical working groups and the results of analysis conducted need to be of sufficient interest and robustness to support reporting.	
Annual assessment of implementation of the key indicators	1.2.2
Proceedings of key indicators expert meetings	1.2.1
Final report on the assessment process for TDI indicator revision	1.2.4
Preparatory work on TDI overview in custodial settings	1.3.2
Improving reporting of survey methods	1.2.3
Draft of revised mortality cohort protocol	1.2.5
Mapping of drug-related mortality among vulnerable groups (in particular people in custodial settings) and sources of information	1.3.2
Preparation of Selected issue on 'Mortality related to drug use: a comprehensive approach and public health implications'	1.2.5
First conceptual framework of health consequences related to drug use	1.2.5
Conceptual paper on data sources and usefulness of hospital emergency data	1.3.1
Proposals on comparing direct and indirect methods to estimate prevalence of intensive cannabis use	1.2.6
Preliminary assessment of data sources and analytical approaches to estimate problem stimulant use	1.2.6
Mapping of data sources on drug use (recreational) among relevant groups (young people, vulnerable groups)	1.3.1
Mapping of national studies on PDU prevalence among vulnerable groups	1.3.1
Proposal for analysis of incidence of drug use by birth cohort and calendar year	1.4.2
Proposal of combined analysis of PDU and TDI to assess differentiated profiles	1.4.1
Proposal of combined analysis between DRD, TDI and PDU	1.4.1
Proposal for an outline of an EMCDDA Monograph on modelling	5.4.1
Availability of information on drug couriers	1.3.3
Draft guidelines for evaluation of drug strategies and action plans	4.1.1
Literature review on drug policy indexes	2.3.1
Enlarged concept of public expenditure	4.1.2
Cross analysis of public expenditure in prisons	2.3.1
Analysis of legal basis of selected harm reduction responses	4.1.3
Alcohol-cannabis links and responses + 'policy scores'	2.3.1
Conceptualisation study: 'Working towards an EMCDDA toolkit to estimate number of clients in treatment' (interim report)	2.2.3
Conceptualisation study: monitoring the Internet	3.2.2
Conceptualisation study: monitoring misuse of medicinal products	3.2.2
Conceptual framework for monitoring drug supply and supply reduction in Europe	5.2.1

Technical reports, papers and reviews (planned)	Reference to specific objective in work programme
Conceptual framework: rapid response team	3.2.2
Conceptual framework: monitoring emerging trends	3.2.1
Second publication on the Spice phenomenon and synthetic cannabinoids	3.1.1 and 3.2
Conceptualisation study: methods and protocol to systematically collect and classify information on environmental prevention policies	2.1.3
Conceptualisation framework and strategy for implementation of data collection instrument on interventions	2.2.1
Conceptualisation framework for monitoring and analysing illicit drug markets, through an economic perspective	2.3.2
CUP prison: draft strategy and objectives	5.3.1
CUP treatment: draft treatment strategy	5.1.1
Availability of cannabis treatment	2.2.3
Availability of social reintegration: getting drug users in treatment back to employment	2.2.3
Investigating office-based opioid prescribing in Europe	2.2.3
Questionnaire items on national addiction medicine	2.1.1
Assessment of the role and potential of expert ratings and quality assurance mechanisms in European reporting on responses to drug use	2.1.2
Handbook of economics of illicit drugs (preparation)	2.2.5

Participation in conferences and technical meetings

Throughout the year, the EMCDDA gets called upon to present its work and findings at numerous conferences and technical meetings. A comprehensive list of these contributions will be presented in the General report of activities 2010.

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Section III

Supporting drug policy dialogue and technical cooperation

1. International cooperation and collaboration with partners

Specific objectives	Main activities
III.1.1 To strengthen the transfer of know-how and best practices in monitoring the drug situation to international and regional partners, and to third countries.	Implement the EMCDDA's strategy on international cooperation.
	Implement MoUs with third countries.
	Update guidelines, principles and methods for compiling country overviews for third countries.
	Launch and disseminate the 'Joint manual for national drug information systems and national focal point building' in cooperation with CICAD.
III.1.2 To ensure fruitful collaboration with European and international partners in the drugs field.	Collaborate with DG JLS and other relevant Commission DGs (SANCO, RELEX, AIDCO, Eurostat, etc.), when appropriate.
	Collaborate actively with European agencies working in the drugs field (Europol, ECDC, EMEA) and explore areas of possible cooperation with other agencies (Eurojust, EFSA and FRA).
	Exchange data, methodological information and tools in the framework of practices and working agreements with international partners such as: Council of Europe Pompidou Group, UNODC, WHO, CICAD, WCO, etc.
	Represent the EMCDDA in conferences and expert meetings to strengthen institutional relations.
	Collaborate with civil society organisations and transnational networks.

2. Technical assistance to candidate and potential candidate countries

Specific objectives	Main activities
III.2.1 To support, coordinate and provide technical assistance to the candidate and potential candidate (stabilisation and association process) countries for their participation in EMCDDA activities.	Follow-up on negotiations between the EC and the candidate countries with regard to their participation in the EMCDDA's work.
	Finalise accounting and reporting for technical assistance project with Croatia and Turkey (IPA-1), with Balkan countries (CARDS), and for conference project (IPA-2).
	Implement IPA-3 technical assistance project, 2010-11.
	Improve mechanism for monitoring and supporting the integration of new members into the EMCDDA's work.

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Section IV

Supporting the achievement of results

1. Communicating the EMCDDA's findings to external audiences

Specific objectives	Main activities
High-quality, timely and accessible products	
IV.1.1 To publish high-quality and timely products in line with the targets committed to in the 2010–12 work programme.	Publish, promote and disseminate products that make EMCDDA work results widely available. In particular, assure that minimum output targets are met (see table on page 8).
	Continue to improve coordination of the production process ensuring effective collaboration between analysts, scientific writers and editors.
	Seek ways of improving timeliness of products.
	Expand network of subcontractors so that a better range of services can be offered and turnaround times of products can be improved.
IV.1.2 To improve the relevance and accessibility of products.	Continue to improve the accessibility of scientific outputs and web-based products.
	Improve practical value of products for targeted end users by collecting feedback from them on accessibility and relevance (through focus groups).
	Continue to develop a user-focused policy for multilingualism (tracking use of multilingual materials).
IV.1.3 To maintain and further develop an up-to-date and high-quality online European reference point on drugs.	Maintain and update existing online resources, products and tools and develop new ones.
	Review current online tools and information resources and prepare development strategy for improving accessibility and usefulness of EMCDDA data and information sources.
	Keep content of website more up to date particularly in the area of scientific developments.
	Develop interactive tools that allow users to independently interrogate online statistical data.
IV.1.4 To improve scientific quality of products and increase scientific output in journals.	Assure quality of EMCDDA guidelines and other products through peer review and utilisation of Scientific Committee (where appropriate).
	Encourage and enable staff and partners to prepare papers for publication in scientific journals, engage with appropriate technical and scientific fora and ensure EMCDDA products make appropriate reference to scientific literature.
IV.1.5 To provide reliable and efficient information, library and documentation services supporting the research needs of scientific staff; evaluate, acquire and manage information resources for use by EMCDDA.	Assure an up-to-date documentation service on drugs and drug addiction and specific literature assistance for staff analytical work.
	Acquire, evaluate and manage appropriate materials; investigate potential new information sources, provide an efficient information service, develop constantly to meet changing needs.
	Engage in networking and cooperation activities with information professionals (ELISAD, SALIS, ISAJE).

Specific objectives	Main activities
	Develop and maintain facilities conducive to study and research, suitably equipped for the organisation and utilisation of the library's resources.
Responding better to differentiated needs	
IV.1.6 To increase responsiveness to covering issues of relevance to target groups.	<p>Find the most fitting form and suitable channel for communicating with each target audience (policymakers, practitioners, scientists and researchers, the general public).</p> <p>Develop ways of reaching policymakers and media at national level more effectively.</p> <p>Clarify and analyse the type of EMCDDA information that is disseminated by NFPs to their national contacts. Then propose actions and develop tools for NFPs to expand their role in disseminating EMCDDA products.</p>
IV.1.7 To facilitate access to drug-related science and research and promote cooperation with the scientific community.	<p>Make the scientific work of the EMCDDA more visible and accessible to the wider scientific community.</p> <p>Create a web area dedicated to drug-related research and scientific resources in the EU and Member States.</p> <p>Promote and facilitate EU drug-related research activities (including support to DG JLS, EU research proposals and projects, Marie Curie programme, etc.).</p> <p>Support academic training initiatives.</p> <p>Promote networking, communication and dissemination of EMCDDA scientific findings in the scientific community and its organisations; contribute to Pompidou Group Research and Ethics expert groups, cooperate with ISAJE.</p>
Cohesive representation and communication	
IV.1.8 To promote a cohesive and shared approach to representation activities across the EMCDDA.	<p>Develop tools and training activities that facilitate a coherent presentation of the EMCDDA's purpose, values and identity.</p> <p>Promote excellence in public speaking and giving presentations by developing quality standards and supporting training activities.</p> <p>Introduce measures to enable more systematic monitoring and analysis of the EMCDDA's representation and external communication activities (including collecting and storing contacts).</p> <p>Ensure that key results of meetings and missions are made available on the web promptly.</p>
'EMCDDA, your reference point on drugs in Europe'	
IV.1.9 To enhance the EMCDDA's reputation and recognition as the European central reference point and authoritative information source in the drugs field.	Continue to: build sound contacts and relations with journalists (from general and specialist publications); provide media-friendly information with clearly defined messages; and assess impact of media coverage.

2. Governance, management and networks

Specific objectives	Main activities
Internal organisation	
IV.2.1 To pursue organisational and scientific management solutions that improve scientific coordination, organisational effectiveness and efficiency.	Evaluate current structures and work processes and take necessary measures. Define the EMCDDA's scientific strategy and ensure its effective implementation.
Statutory bodies	
IV.2.2 To provide support to EMCDDA statutory bodies to facilitate strategic decision-making and scientific advice regarding quality of EMCDDA work.	Prepare, coordinate, organise and follow up on the meetings and decisions of the Management Board, Executive Committee and Budget Committee. Ensure a well-functioning Scientific Committee.
Reitox network	
IV.2.3 To assure strategic development of the Reitox network, its visibility and management with a view to ensuring high-quality EMCDDA products.	Finalise and implement Reitox development strategy, encourage horizontal cooperation between focal points and secure funds of national monitoring systems. Refine working processes and further consolidate the grants management system. Redesign and update the Reitox extranet. Encourage joint scientific projects between NFPs (all or selected) and the EMCDDA.

3. Administration and supporting core business

Specific objectives	Main activities
Human resources	
IV.3.1 To further develop the implementation and monitoring policies, procedures and tools for effective management of the EMCDDA's human resources (HR).	Continue to develop and apply structured and effective human resources policies and ensure effective implementation of the updated EMCDDA 'Staff policy plan'. Ensure efficient recruitment procedures (development of e-recruitment tools) and coherent career management to maintain a team of highly qualified staff that are fully operational and motivated. Ensure efficient overall administration of personnel rights, entitlements and obligations and set up a database to assist with this. Regularly monitor needs for competency enhancement and conduct appropriate training activities.

Specific objectives	Main activities
IV.3.2 Improve human resources management and enhance scientific excellence and recognition of EMCDDA staff.	Develop a strategic model for HR management.
	Carry out a survey on the commitment of EMCDDA staff.
	Develop leadership capacity.
	Develop current policies for recruitment of Seconded National Experts, trainees and visiting academics.
	Define HR management tools and processes to enable the development of the scientific capacity and production of EMCDDA staff.
Financial management	
IV.3.3 To assure and further enhance appropriate processes and procedures for efficient and effective financial management and control.	Ensure efficient and effective budget implementation.
	Make full use of management and reporting functions of activity-based accounting system (ABAC).
	Ensure effective procurement and contracting processes.
	Develop and launch electronic Reitox grant and project management tool.
Accounting	
IV.3.4 To ensure that accounting data and related information used for preparing EMCDDA accounts and financial statements are accurate and timely through the full use of new integrated accounting and reporting system.	Develop the reporting tool especially for accounting purposes.
	Develop the new income structure available in ABAC.
	Make full use of budget control system.
Planning and reporting	
IV.3.5 To coordinate and administer effectively the planning, reporting and monitoring processes of the EMCDDA's work.	Coordinate the contributions for compiling the 2009 General report of activities.
	Ensure timely planning for EMCDDA 2011 activities.
	Carry out mid-year monitoring of the implementation of the 2010 work programme.
	Develop and progressively use performance indicators.
Infrastructure and logistics	
IV.3.6 To develop safety at work, sound environmental management and security in the buildings, including reducing utility costs and promoting use of renewable energy.	Improve the warden system to ensure preparedness and staff safety.
	Draw up a service level agreement with the EC security department for security issues.
	Promote use of renewable energy and reduce utility costs through its use.
	Continue to cooperate with EMSA on matters of common interest.
IV.3.7 To provide a suitable work environment and related services, and improve efficiency and effectiveness through promoting a customer-oriented approach.	Ensure provision of appropriate services and maintenance for the management of the new premises.
	Improve access to services through intranet-based tools.
	Ensure a healthy working environment.

Specific objectives	Main activities
ICT	
IV.3.8 To ensure successful and efficient delivery of results through quality, cost-effective and timely ICT support services, infrastructure and solutions.	<p>Ensure planned upgrades and maintenance of data collection, data analysis and product dissemination instruments.</p> <p>Contribute to the strategic reflection and vision for evolution of data collection, analytical and dissemination tools as well as the supporting infrastructure architecture and related EMCDDA services.</p> <p>Draw up strategy and implementation guidelines for improved reliability and quality of the operational services provided, and begin its implementation.</p> <p>Contribute to the introduction of best practices and standards of governance, planning and service management in the agency.</p>

Annexes

Annex I

Potential risk factors

Risk factors

At the time of drawing up the 2007–09 work programme, the EMCDDA identified potential risk factors that could affect planned deliveries and presented them to its Management Board. The table below updates the risks listed in the previous work programme and assesses the likelihood of their impact on the 2010 work programme.

	Risk factors identified for delivery of 2010–12 work programme	Likelihood of impact on 2010 work programme
External risks	1. Substantial change in the current financial perspectives for the EMCDDA budget relying on the EC grant over the 2010–12 period.	The 2010 work programme has been drawn up on the basis of the EMCDDA draft budget for 2010 which relies on EC funding of EUR 15 000 000. Any reduction in this sum would require outputs to be reviewed.
	2. Unplanned operational impact entailed by the further possible enlargement of the EU and the increasing number of applicant countries.	The 2010 draft budget already takes into account the impact of the expected additional ‘EMCDDA member countries’.
	3. Supplementary specific requests from EU institutions to provide technical support for the implementation of EC programmes and actions.	A number of core tasks in support of the EU institutions (contribution to implementation assessment and evaluation of action plan, implementation of the Council decision on new drugs, etc.) have been foreseen for 2010. Additional requests from EU institutions to provide technical support for implementing actions and programmes would require priorities to be reviewed (!) and the supplementary resources to be identified.
	4. Supplementary requests from Member States, candidate and potential candidate countries and third parties to provide expertise in specific domains.	The current level of requests can be accommodated in routine work, but a significant increase in demand for this type of expertise would need additional scientific resources dedicated to it and would need to be balanced against other priorities of the work programme (!).

(!) The process for reviewing priorities is as follows: identify projects/meetings/studies/recruitments that can be delayed, downsized or cancelled and reassign resources appropriately.

	Risk factors identified for delivery of 2010–12 work programme	Likelihood of impact on 2010 work programme
External risks	5. Natural catastrophes: earthquakes (leading to possible tsunamis) or floods.	The location of the EMCDDA's new facilities on the banks of the Tagus river raises a potential risk of being affected by these natural catastrophes. The likely consequences of an earthquake are hard to predict and appropriate measures would have to be taken in order to deal with the resulting damage. As regards the Tagus flooding, the information available suggests that the potential risk is quite low.
	6. Terrorist attacks.	As the new facilities are more visible than before, they could (at least in theory) attract the attention of terrorist groups. The likelihood of such an event is considered low, principally because Portugal has no recent background in this kind of attack. Moreover, if the EU institutions were the target for such attacks there are institutions in Europe that are far more visible and emblematic, a fact that should decrease the potential risk faced by the EMCDDA in this respect.
	7. Outbreak of A influenza (H1N1 type) pandemics.	The A influenza pandemic will probably peak during this coming winter and it is difficult to predict the percentage of EMCDDA staff that will be affected by it. Clear instructions on preventive measures, deemed to moderate the number of infections, have been circulated to all staff. This should decrease the likelihood of simultaneous sick leave of key staff.
Internal risks	8. Unexpected departure of key members of staff.	Given the highly specialised and technical nature of much of the agency's work, finding suitable replacements can be a time-consuming task. Recent reorganisation of scientific expertise provides sounder back-up arrangements. Investment in the human resources area ensures that arising needs can be acted upon with minimum delay.

Risk management

The worst case scenario would be linked to a major earthquake leading to a tsunami. As suggested above, an emergency/rescue plan conceived to address the resulting damages would be needed. Even so, disruption of the EMCDDA's activities would probably ensue, the duration of which would depend on the severity of the catastrophe and on the promptness of the aid received from public and/or private sources.

Apart from the situation mentioned above, the types of consequences that any of the listed scenarios could have are:

- a) reduced activities in support of partners and for non-core tasks;
- b) delay or postponement of necessary developmental work, support and capacity-building activities;
- c) reduction in capacity for analytical work and transversal products;
- d) reduction in the scope or quality of planned outputs.

Except for major catastrophes (notably tsunamis), should any of the above scenarios occur, a detailed assessment of their impact both in budgetary terms and in terms of the work and outputs of the EMCDDA would have to be conducted. The implications of this assessment would then need to be considered in terms of the overall priorities of the work programme.

In the case of major catastrophes, further measures would be needed.

The EMCDDA will use and further strengthen its internal monitoring and evaluation capacity to prevent, manage and minimise the impact of the abovementioned risks. For this purpose, it has adopted a series of measures aimed at improving the planning, monitoring, assessment and execution of its work programme and budget.

Annex II

Estimated allocation/use of the appropriations provided under the EMCDDA 2010 budget for the implementation of the EMCDDA 2010 work programme

The amounts indicated in the table below are based on the EMCDDA's budget for 2010 to be adopted by the EMCDDA's Management Board in December 2009. This budget relies on the following revenues:

- EUR 15 000 000 to be provided by the EC 2010 subsidy to the EMCDDA;
- EUR 398 748 to be provided by Norway for its participation in the EMCDDA;
- EUR 100 000 to be provided by Turkey for the first year of its participation in the EMCDDA.

Furthermore, the EMCDDA's 2010 budget enters as assigned appropriations a financing of EUR 500 000 from the IPA programme for the implementation of a project for technical assistance aimed at the 'Preparation of IPA Beneficiaries for their participation in the EMCDDA' (so called IPA 3 project).

The table below presents the estimated allocation of the EMCDDA's 2010 budget appropriations for the implementation of the EMCDDA's 2010 work programme:

Objectives and activities areas in EMCDDA 2010 WP	Main actors responsible for implementation	Estimated budget appropriations (EUR) allocated for implementation
Monitoring and reporting on the drugs problem in Europe: <ul style="list-style-type: none"> • Monitoring the drug situation • Monitoring responses, interventions and solutions applied to drug-related problems • Monitoring new trends and developments and assessing the risks of new substances • Improving Europe's capacity to monitor and evaluate policies • Cross-unit projects (CUPs) 	Epidemiology, crime and markets (EPI), Interventions, law and policy (RES) and Scientific partners and documentation (SCD) units	4 242 966
	Reitox national focal points (via EMCDDA co-financing)	2 594 497
Communicating the EMCDDA's findings to external audiences	Communication (COM) unit	1 928 467
Governance, management and networks	Directorate (DIR)	1 017 980
	Reitox and international cooperation (RTX) unit	944 622
Administration and support to core business	Administration (ADM) unit	3 515 725
	Information and communication technology (ICT) unit	1 254 491
Total EMCDDA 2010 budget non-assigned appropriations		15 498 748

Objectives and activities areas in EMCDDA 2010 WP	Main actors responsible for implementation	Estimated budget appropriations (EUR) allocated for implementation
Supporting drug policy dialogue and technical cooperation <ul style="list-style-type: none"> • International cooperation and collaboration with partners • Technical assistance to candidate and potential candidate countries 	RTX unit namely by implementing technical assistance (IPA-3 project)	500 000
Total EMCDDA 2010 budget assigned appropriations		500 000

Annex III

List of the national focal points beneficiaries of the Reitox grants

Please note that unless there is a reorganisation within the national public administration of the beneficiary countries, the beneficiaries of the grant are the same each year. Based on the decision of the Management Board of the EMCDDA in December 2007 the maximum amount of the Grant receivable by the Focal Points is indexed annually by 2 % in order to maintain the real value of the grant. As such the maximum amount of the Grant per country in 2010 will be 101 150 €. The potential beneficiaries for 2010 are:

1. Gesundheit Österreich GmbH, Stubenring 6; 1010 Wien; Austria
2. Scientific Institute of Public Health - Patrimoine (IPH - Patrimoine), Rue Juliette Wytsman, n° 14; 1050 Brussels; Belgium
3. National Centre for Addictions (NCA BG), Pirotska str. 117; 1303 Sofia, Bulgaria
4. Cyprus National Monitoring Centre for Drugs and Drug Addiction - EKTEPN, Antidrug Council, Magnolia Center - Offices 11-12; Strovolos Avenue n° 32; 2018 Nicosia, Cyprus
5. Úřad vlády České republiky (Office of the Government of the Czech Republic), Nabřeží Edvarda Beneše n° 4; 118 01 Praha 1 - Malá Strana; Czech Republic
6. National Board of Health (Sundhedsstyrelsen), Islands Brygge, n° 67; 2300 Copenhagen S; Denmark
7. Tervise Arengu Instituut (National Institute for Health Development - NIHD), Hiiu Street n° 42; 11619 Tallinn; Estonia
8. National Institute for Health and Welfare (THL), Mannerheimintie 166; 00271 Helsinki; Finland
9. Observatoire Français des Drogues et des Toxicomanies (OFDT), Avenue du Stade de France 3; 93218 Saint Denis La Plaine Cedex; France
10. Institut für Therapieforschung (IFT), Parzivalstrasse 25; 80804 Munich; Germany
11. University Mental Health Research Institute - Greek Reitox Focal Point (UMHRI), 2, Soranou tou Efesiou, Papagou; 115 27 Athens; Greece
12. Országos Epidemiológiai Központ (National Center for Epidemiology), Gyáli út n° 2-6; 1097 Budapest; Hungary
13. Health Research Board (HRB), Lower Baggot Street 73; Dublin 2; Éire / Ireland
14. Presidenza del Consiglio dei Ministri – Dipartimento Politiche Antidroga, Via della Vite 13; 00187 Roma; Italy

15. Sabiedrības Veselības Aģentūra (Public Health Agency), Klijanu iela 7, Rīga, LV-1012; Latvia
16. Narkotiku Kontroles Departaments Prie Lietuvos Respublikos Vyriausybės (Drug Control Department under the Government of the Republic of Lithuania - DCD), Šv. Stepono n° 27; 01139 Vilnius; Lithuania
17. Centre de Recherche Public - Santé (CRP-Santé), Rue Dicks 18; 1417 Luxembourg; Grand Duchy of Luxembourg
18. Ministry for the Family and Social Solidarity (MFSS), Republic Street; Palazzo Ferreria; CMR02 Valletta; Malta
19. Stichting Trimbos-Instituut, Da Costakade, n° 45; 3521 VS Utrecht; the Netherlands
20. Krajowe Biuro Do Spraw Przeciwdziałania Narkomanii (National Bureau for Drug Prevention – Polish National Focal Point), ul. Dereniowa n° 52-54; 02-776 Warsaw; Poland
21. Instituto da Droga e da Toxicoddependência (IDT), Praça de Alvalade, n° 7 – 6°; 1700 - 036 Lisboa; Portugal
22. National Anti-drug Agency (NAA) – Romanian Monitoring Center for Drugs and Drug Addiction, Unirii Boulevard n° 37, Bl. A4, ground floor; 3rd district; 030823 Bucharest; Romania (yet to be confirmed)
23. Úrad vlády Slovenskej republiky (Office of the Government of the Slovak Republic), Námestie slobody n° 1; 813 70 Bratislava; Slovak Republic
24. Inštitut za Varovanje Zdravja Republike Slovenije (Institute of Public Health of the Republic of Slovenia), Trubarjeva n° 2; 1000 Ljubljana; Slovenia
25. Government Delegation for the National Plan on Drugs, Calle Recoletos 22; 28001 Madrid; Spain
26. National Institute of Public Health - Statens Folkhälsoinstitut (FHI), SE 831 40 Östersund; Sweden
27. Department of Health - Sexual Health and Substance Misuse, Waterloo Road, Wellington House 133-155, London SE1 8UG, United Kingdom

Annex IV

Template of the 2010 Reitox grant agreement

GRANT AGREEMENT FOR AN ACTION

AGREEMENT N° GA.10.RTX.###.1.0

The European Union ("the Union"), represented by the European Monitoring Centre for Drugs and Drug Addiction ("the EMCDDA"), itself represented for the purposes of signature of this agreement by Alexis GOOSDEEL, Head of REITOX Coordination and International Cooperation Unit

of the one part,

and

[full official name]

[official legal form]

[official registration no]

[full official address]

[VAT number],

("the beneficiary"), represented for the purposes of signature of this agreement by [name, forename and function]

of the other part,

hereafter referred to as "the parties to the agreement"

Whereas Council Regulation (EEC) No 302/93 on the establishment of the European Monitoring Centre for Drugs and Drug Addiction provides, in Article 5, for the European Information Network on Drugs and Drug Addiction (REITOX), forming the infrastructure for collecting and exchanging information and documentation;

Whereas REITOX National Focal Points have officially been designated in all Member States and are fully operational throughout the lifetime of the present grant agreement;

Whereas the Management Board of the EMCDDA has unanimously decided on 3-5 July 2002, to establish a grant based system between the EMCDDA and the REITOX National Focal Points;

Whereas the Management Board of the EMCDDA has adopted unanimously on 15-17 January 2003, the 'Operating framework for the REITOX system';

Whereas the Management Board of the EMCDDA has adopted unanimously on 1-2 July 2009 the 2010-2012 work programme of the EMCDDA;

Whereas the Management Board of the EMCDDA has adopted unanimously on 3-4 December 2009, the structure and content of the work programme for 2010, and the corresponding division of credits for 2010;

Whereas the Management Board of the EMCDDA has adopted unanimously on 3-4 December 2009, the 2010 budget and the carry over of credits from the 2009 financial year to the year 2010.

HAVE AGREED

the Special Conditions and General Conditions below, and the following Annexes:

Annex I	Description of the action
Annex II	Estimated budget of the action
Annex III	Technical and financial implementation reports to be submitted
Annex IV	Guidelines for 2010 national reporting
Annex V	Activity Reporting Template
Annex VI	Intermediate Financial Reporting Template
Annex VII	Final Financial Reporting Template
Annex VIII	Summary statement of expenses template
Annex IX	Timetable for reporting
Annex X	Provisional schedule of 2010 EMCDDA meetings

which form an integral part of this agreement (" the agreement").

The terms set out in the Special Conditions shall take precedence over those in the other parts of the agreement.

The terms of the General Conditions shall take precedence over those in the Annexes.

I – SPECIAL CONDITIONS

ARTICLE I.1 - PURPOSE

I.1.1 The EMCDDA has decided to award a grant, under the terms and conditions set out in the Special Conditions, the General Conditions and the Annexes to the agreement, which the beneficiary hereby declares that he has taken note of and accepts, for the action entitled 'Active contribution by the National Focal Point to the implementation of the EMCDDA 2010 work programme' ("the action").

I.1.2 The beneficiary accepts the grant and undertakes to do everything in his power to carry out the action as described in Annex I, acting on his own responsibility. This includes the participation in the meetings organized periodically by the EMCDDA, described in Annex X - Provisional schedule of 2010 EMCDDA meetings.

ARTICLE I.2 – DURATION

I.2.1 The agreement shall enter into force on the date when the last of the two parties signs.

I.2.2 The action shall run from 1 January 2010 ("starting date of the action"; or from the date on which the beneficiary officially requested the grant) until 31 December 2010.

ARTICLE I.3 – FINANCING THE ACTION

I.3.1 The total cost of the action is estimated at EUR [...], as shown in the estimated budget in Annex II. That budget shall give a detailed breakdown of the costs that are eligible for Unit funding under the terms of Article II.14, of any other costs that the action may entail, and of all receipts, so that receipts and costs balance.

I.3.2 The total eligible costs of the action are estimated at EUR [...], as shown in the estimated budget in Annex II.

Indirect costs are eligible at a flat rate of 7% of the total direct costs eligible, subject to the conditions laid down in Article II.14.3.

I.3.3 The EMCDDA shall contribute with 50% of the actual eligible costs approved by the EMCDDA, up to a maximum of EUR (amount in figures and in words). The final amount of the grant shall be determined as specified in Article II.17, without prejudice to Article II.19.

I.3.4 By way of exception to Article II.13, the beneficiary may, when carrying out the action, adjust the estimated budget by making transfers between the six headings of eligible costs, provided that this adjustment of expenditure does not affect the implementation of the action and transfer between the six headings does not exceed 10% of the amount of each heading of eligible costs for which the transfer is intended, and without exceeding the total eligible costs indicated in paragraph 2. The beneficiary shall inform the EMCDDA accordingly in writing.

ARTICLE I.4 –PAYMENT ARRANGEMENTS

I.4.1 Pre-financing:

Within 45 days of the date when the signed agreement is returned by the beneficiary and upon receipt of the request for pre-financing, a payment representing a maximum of 40% of the total amount of the grant specified in Article I.3.3. shall be made to the beneficiary, providing that the balance payment for the previous year grant agreement with the EMCDDA was settled.

I.4.2 Interim payment:

Every request for interim payment shall be accompanied by the interim technical and financial implementation reports specified in Article II.15.3. The EMCDDA shall have 45 days to approve or reject the documents in question or to request additional supporting documents or information under the procedure laid down in Article II.15.3. In that case, the beneficiary shall have 45 days to submit the additional information or documents requested.

The amount of the interim payment shall be determined on the basis of the eligible costs actually incurred, as shown in the interim statement and approved by the EMCDDA. In no circumstances may the interim payment exceed 80% of maximum amount of the grant specified in Article I.3.3. The amount of any pre-financing previously paid to the beneficiary shall be deducted.

The interim payment shall be made to the beneficiary within 45 days following approval by the EMCDDA of the documents accompanying the request for interim payment.

The EMCDDA may suspend the period for payment in accordance with the procedure in Article II.16.2.

I.4.3 Payment of the balance

The request for payment of the balance shall be accompanied by the final technical and financial implementation reports specified in Article II.15.4 and by an external audit report on the action's accounts. The EMCDDA shall have 45 days to approve or reject the documents in question or to request additional supporting documents or information under the procedure laid down in Article II.15.4. In that case the beneficiary shall have 45 days to submit the additional information or new documents requested.

A payment representing the balance of the grant determined in accordance with Article II.17 shall be made to the beneficiary within 45 days following approval by the EMCDDA of the documents accompanying the request for payment of the balance.

The EMCDDA may suspend the period for payment in accordance with the procedure in Article II.16.2.

ARTICLE I.5 – SUBMISSION OF REPORTS AND OTHER DOCUMENTS

The provisions relating to the production of the technical and financial implementation reports and other documents referred to in Article I.4 are contained in Annex III.

ARTICLE I.6 – BANK ACCOUNT

Payments shall be made to the beneficiary's bank account or sub-account denominated in euro, as indicated in the financial identification form which was attached to the grant request.

This account or sub-account shall allow the funds paid by the EMCDDA to be identified.

The beneficiary shall inform the EMCDDA in writing each time the concerned bank account or sub-account have changed, by sending a new signed and stamped financial identification form with the new bank account or sub-account details.

If the funds paid to this account yield interest or equivalent benefits under the law of the State on whose territory the account is opened, such interest or benefits shall, if they are generated by pre financing payments, be recovered by the EMCDDA as specified in Article II.16.4.

ARTICLE I.7 – GENERAL ADMINISTRATIVE PROVISIONS

I.7.1 Any communication - such as requests for payment, technical and financial information, reports and any other correspondence - in connection with the agreement shall be in writing, indicating the number of the agreement, and shall be sent to the following persons and addresses:

For the beneficiary:

Mr/Mrs

Head of [country] Focal Point / Permanent NFP contact person

[Official denomination]

[Full official address]

For the EMCDDA:

Mr. Frédéric DENECKER

REITOX Network Manager

European Monitoring Centre for Drugs and Drug Addiction

Cais do Sodré

PT - 1249-289 Lisbon

Portugal

1.7.2 In the event of modifications in the aforementioned persons and/or contact data, each concerned party commits itself to communicate in written to the other party the occurred modification within the best delay.

In the above mentioned circumstances or in case of impediment of one of the above persons, each concerned party commits itself to ensure the continuity of the respective functions and namely, to communicate to the other party, the name and contacts of the person who will ensure the necessary replacement.

ARTICLE 1.8 – LAW APPLICABLE AND COMPETENT COURT

The grant is governed by the terms of the agreement, the Union law applicable and, on a subsidiary basis, by the law of Portugal relating to grants.

Any dispute between the parties arising from the interpretation or application of the provisions of the agreement, which cannot be settled amicably, shall be brought before the Court of First Instance of the European Union and, in the event of appeal, the Court of Justice of the European Union.

ARTICLE 1.9 – OWNERSHIP / USE OF RESULTS

1.9.1 Ownership of the results of the action, including intellectual property rights, and of the reports and other documents related to it shall be vested, on an equal basis, in both the EMCDDA and the beneficiary.

1.9.2 Both the EMCDDA and the beneficiary grant each other the right to make free use of the results of the action as they deem fit, provided they do not thereby breach their respective confidentiality obligations or existing intellectual property rights.

ARTICLE 1.10 – DATA PROTECTION

All personal data contained in the agreement shall be processed in accordance with Regulation (EC) No 45/2001 of the European Parliament and of the Council on the protection of individuals with regard to the processing of personal data by

the Community institutions and bodies and on the free movement of such data. Such data shall be processed solely in connection with the implementation and follow up of the agreement by the EMCDDA, without prejudice to the possibility of passing the data to internal audit services, to the European Court of Auditors, to the Financial Irregularities Panel and/or to the European Anti-Fraud Office (OLAF) for the purposes of safeguarding the financial interests of the Union.

Beneficiaries may, on written request, gain access to their personal data and correct any information that is inaccurate or incomplete. They should address any questions regarding the processing of their personal data to the EMCDDA. Beneficiaries may lodge a complaint against the processing of their personal data with the European Data Protection Supervisor at any time.

II – GENERAL CONDITIONS

PART A: LEGAL AND ADMINISTRATIVE PROVISIONS

ARTICLE II.1 – LIABILITY

II.1.1 The beneficiary shall have sole responsibility for complying with any legal obligations incumbent on him.

II.1.2 The EMCDDA shall not, in any circumstances or on any grounds, be held liable in the event of a claim under the agreement relating to any damage caused during the action's execution. Consequently, the EMCDDA will not entertain any request for indemnity or reimbursement accompanying any such claim.

II.1.3 Except in cases of force majeure, the beneficiary shall make good any damage sustained by the EMCDDA as a result of the execution or faulty execution of the action.

II.1.4 The beneficiary shall bear sole liability vis-à-vis third parties, including for damage of any kind sustained by them while the action is being carried out.

ARTICLE II.2 – CONFLICT OF INTERESTS

II.2.1 The beneficiary undertakes to take all the necessary measures to prevent any risk of conflicts of interests which could affect the impartial and objective performance of the agreement. Such conflict of interests could arise in particular as a result of economic interest, political or national affinity, family or emotional reasons, or any other shared interest.

II.2.2 Any situation constituting or likely to lead to a conflict of interests during the performance of the agreement must be brought to the attention of the EMCDDA, in writing, without delay. The beneficiary shall undertake to take whatever steps are necessary to rectify this situation at once.

II.2.3. The EMCDDA reserves the right to check that the measures taken are appropriate and may demand that the beneficiary take additional measures, if necessary, within a certain time.

ARTICLE II.3 - OWNERSHIP/USE OF THE RESULTS

II.3.1 Unless stipulated otherwise in the agreement, ownership of the results of the action, including industrial and intellectual property rights, and of the reports and other documents relating to it shall be vested in the beneficiary.

II.3.2 Notwithstanding paragraph 1, the beneficiary grants the EMCDDA the right to make free use of the results of the action as it deems fit, provided it does not thereby breach its confidentiality obligations or existing industrial and intellectual property rights.

ARTICLE II.4 – CONFIDENTIALITY

The EMCDDA and the beneficiary undertake to preserve the confidentiality of any document, information or other material directly related to the subject of the agreement that is duly classed as confidential, if disclosure could cause prejudice to the other party. The parties shall remain bound by this obligation beyond the closing date of the action.

ARTICLE II.5 – PUBLICITY

II.5.1 Unless the EMCDDA requests otherwise, any communication or publication by the beneficiary about the action, including at a conference or seminar, shall indicate that the action has received funding from the Union.

Any communication or publication by the beneficiary, in any form and medium, shall indicate that sole responsibility lies with the author and that the EMCDDA is not responsible for any use that may be made of the information contained therein.

II.5.2 The beneficiary authorises the EMCDDA to publish the following information in any form and medium, including via the Internet:

- the beneficiary's name and the address,
- the subject and purpose of the grant,
- the amount granted and the proportion of the action's total cost covered by the funding.

Upon a reasoned and duly substantiated request by the beneficiary, the EMCDDA may agree to forgo such publicity if disclosure of the information indicated above would risk compromising the beneficiary's security or prejudicing his commercial interests.

ARTICLE II.6 – EVALUATION

Whenever the EMCDDA carries out an interim or final evaluation of the action's impact measured against the objectives of the EMCDDA work programme concerned, the beneficiary undertakes to make available to the EMCDDA and/or persons authorised by it all documents or information liable, by their nature, to permit the evaluation to be successfully completed and to give them the rights of access specified in Article II.19.

ARTICLE II.7 – SUSPENSION

II.7.1 The beneficiary may suspend implementation of the action if exceptional circumstances make this impossible or excessively difficult, notably in the event of force majeure. He shall inform the EMCDDA without delay, giving all the necessary reasons and details and the foreseeable date of resumption.

II.7.2 If the EMCDDA does not terminate the agreement under Article II.11.2, the beneficiary shall resume implementation once circumstances allow and shall inform the EMCDDA accordingly. The duration of the action shall be extended by a period equivalent to the length of the suspension. In accordance with Article II.13, a supplementary written agreement shall be concluded to extend the duration of the action and to make any amendments that may be necessary to adapt the action to the new implementing conditions.

ARTICLE II.8 – FORCE MAJEURE

II.8.1 Force majeure shall mean any unforeseeable exceptional situation or event beyond the parties' control which prevents either of them from performing any of their obligations under this agreement, was not attributable to error or negligence on their part, and proves insurmountable in spite of all due diligence. Defects in equipment or material or delays in making them available (unless due to force majeure), labour disputes, strikes or financial difficulties cannot be invoked as force majeure by the defaulting party.

II.8.2 If either party is faced with force majeure, it shall notify the other party without delay by registered letter with acknowledgement of receipt or equivalent, stating the nature, probable duration and foreseeable effects.

II.8.3 Neither of the parties shall be held in breach of their obligations under the agreement if they are prevented from fulfilling them by force majeure. The parties shall make every effort to minimize damage to a minimum.

II.8.4. The action may be suspended in accordance with Article II.7.

ARTICLE II.9 – AWARD OF CONTRACTS

II.9.1 If the beneficiary has to conclude contracts in order to carry out the action and the corresponding costs are included in one of the headings of eligible costs according to the estimated budget, he shall award the contract to the bid offering best value for

money; in doing so he shall take care to avoid any conflict of interests.

II.9.2 Contracts as referred to in paragraph 1 may be awarded only in the following cases:

(a) they may only cover the execution of a limited part of the action;

(b) recourse to the award of contracts must be justified having regard to the nature of the action and what is necessary for its implementation;

(c) the tasks concerned must be set out in Annex I and the corresponding estimated costs must be set out in detail in the budget estimation in Annex II.

(d) any recourse to the award of contracts while the action is under way, if not provided for in the initial grant application, shall be subject to prior written authorisation by the EMCDDA.

(e) the beneficiary shall retain sole responsibility for carrying out the action and for compliance with the provisions of the agreement. The beneficiary must undertake to make the necessary arrangements to ensure that the contractor waives all rights in respect of the EMCDDA under the agreement.

(f) the beneficiary must undertake to ensure that the conditions applicable to him under Articles II.1, II.2, II.3, II.4, II.5, II.6, II.10 and II.19 of the agreement are also applicable to the contractor.

ARTICLE II.10 – ASSIGNMENT

II.10.1 Claims against the EMCDDA may not be transferred.

II.10.2. In exceptional circumstances, where the situation warrants it, the EMCDDA may authorise the assignment to a third party of the agreement and payments flowing from it, following a written request to that effect, giving reasons, from the beneficiary. If the EMCDDA agrees, it must make its agreement known in writing before the proposed assignment takes place. In the absence of the above authorisation, or in the event of failure to observe the terms thereof, the assignment shall not be enforceable against and shall have no effect on the EMCDDA.

II.10.3. In no circumstances shall such an assignment release the beneficiary from his obligations to the EMCDDA.

ARTICLE II.11 – TERMINATION

II.11.1 Termination by the beneficiary

In duly justified cases, the beneficiary may withdraw his request for a grant and terminate the agreement at any time by giving 60 days' written notice stating the reasons, without being required to furnish any indemnity on this account. If no reasons are given or if the reasons given are rejected by the EMCDDA, the beneficiary shall be deemed to have terminated this agreement improperly, with the consequences set out in the third subparagraph of paragraph 4 of this article.

II.11.2 Termination by the EMCDDA

The EMCDDA may terminate the agreement, without any indemnity on its part, in the following circumstances:

- (a) in the event of a change to the beneficiary's legal, financial, technical, organisational or ownership situation that is liable to affect the agreement substantially or to call into question the decision to award the grant;
- (b) if the beneficiary fails to fulfil a substantial obligation incumbent on him under the terms of the agreement, including its annexes;
- (c) in the event of force majeure, notified in accordance with Article II.8, or if the action has been suspended as a result of exceptional circumstances, notified in accordance with Article II.17;
- (d) if the beneficiary is declared bankrupt, being wound up or having his affairs administered by the courts, has entered into arrangements with creditors, has suspended business activities, is the subject of any other similar proceedings concerning those matters, or is in an analogous situation arising from a similar procedure provided for in national legislation or regulations;
- (e) where the EMCDDA has evidence or seriously suspects the beneficiary or any related entity or person, of professional misconduct;
- (f) if the beneficiary has not fulfilled obligations relating to the payment of social security contributions or the payment of taxes in accordance with the legal provisions of the country in which it is established;
- (g) where the EMCDDA has evidence or seriously suspects the beneficiary or any related entity or person, of fraud, corruption, involvement in a criminal organisation or any other illegal activity detrimental to the Unit's financial interests;
- (h) where the EMCDDA has evidence or seriously suspects the beneficiary or any related entity or person, of substantial errors, irregularities or fraud in the award procedure or the performance of the grant;
- (i) if the beneficiary has made false declarations or submits reports inconsistent with reality to obtain the grant provided for in the agreement.

In the cases referred to in points (e), (g) and (h) above, any related person shall mean any physical person with powers of representation, decision-making or control in relation to the beneficiary. Any related entity shall mean in particular any entity which meets the criteria laid down by Article 1 of the Seventh Council Directive n° 83/349/EEC of 13 June 1983.

II.11.3 Termination procedure

The termination procedure is initiated by registered letter with advice of delivery or equivalent.

In the cases referred to in points (a), (b), (d), (e), (g) and (h) above, the beneficiary

shall have 30 days to submit his observations and take any measures necessary to ensure continued fulfilment of his obligations under the agreement. If the EMCDDA fails to confirm acceptance of these observations by giving written approval within 30 days of receiving them, the termination procedure shall continue to run.

Where notice is given, termination shall take effect at the end of the period of notice, which shall start to run from the date when notification of the EMCDDA's decision to terminate the agreement is received.

If notice is not given in the cases referred to in points (c), (f) and i) above termination shall take effect from the day following the date on which notification of the EMCDDA's decision to terminate the agreement is received.

II.11.4 Effects of termination

In the event of termination, payments by the EMCDDA shall be limited to the eligible costs actually incurred by the beneficiary up to the date when termination takes effect, in accordance with Article II.17. Costs relating to current commitments that are not due to be executed until after termination shall not be taken into account.

The beneficiary shall have 60 days from the date when termination takes effect, as notified by the EMCDDA, to produce a request for final payment in accordance with Article II.15.4. If no request for final payment is received within this time limit, the EMCDDA shall not reimburse the expenditure incurred by the beneficiary up to the date of termination, and it shall recover any amount if its use is not substantiated by the technical implementation reports and financial statements approved by the EMCDDA.

By way of exception, at the end of the period of notice referred to in paragraph 3, where the EMCDDA is terminating the agreement on the grounds that the beneficiary has failed to produce the final technical implementation report and financial statement within the deadline stipulated in Article I.5 and the beneficiary has still not complied with this obligation within two months following the written reminder sent by the EMCDDA by registered letter with advice of delivery or equivalent, the EMCDDA shall not reimburse the expenditure incurred by the beneficiary up to the date on which the action ended and it shall recover any amount if its use is not substantiated by the technical implementation reports and financial statements approved by the EMCDDA.

By way of exception, in the event of improper termination by the beneficiary or termination by the EMCDDA on the grounds set out in points (e), (f) or (g) of paragraph 2, the EMCDDA may require the partial or total repayment of sums already paid under the agreement on the basis of technical implementation reports and financial statements approved by the EMCDDA, in proportion to the gravity of the failings in question and after allowing the beneficiary to submit his observations.

ARTICLE II.12 – REGULATORY FINANCIAL PENALTIES

By virtue of the Financial Regulation applicable to the general budget of the European Communities, any beneficiary declared to be in grave breach of his obligations shall be liable to financial penalties of between 2% and 10% of the value of the grant

in question, with due regard for the principle of proportionality. This rate may be increased to between 4% and 20% in the event of a repeated breach in the five years following the first. The beneficiary shall be notified in writing of any decision by the EMCDDA to apply such financial penalties.

ARTICLE II.13 - AMENDMENTS

II.13.1 Any amendment to the agreement must be the subject of a written supplementary agreement concluded between the parties. No oral agreement may bind the parties to this effect.

II.13.2 The supplementary agreement may not have the purpose or effect of making changes to the agreement which might call into question the decision awarding the grant or result in unequal treatment of applicants.

II.13.3 If the request for amendment is made by the beneficiary, he must send it to the EMCDDA in good time before it is due to take effect and at all events two months before the closing date of the action, except in cases duly substantiated by the beneficiary and accepted by the EMCDDA.

PART B – FINANCIAL PROVISIONS

ARTICLE II.14 – ELIGIBLE COSTS

II.14.1 Eligible costs of the action are costs actually incurred by the beneficiary, which meet the following criteria:

- they are incurred during the duration of the action as specified in Article I.2.2 of the agreement, with the exception of costs relating to final reports and certificates on the action's financial statements and underlying accounts;
- they are connected with the subject of the agreement and they are indicated in the estimated overall budget of the action;
- they are necessary for the implementation of the action which is the subject of the grant;
- they are identifiable and verifiable, in particular being recorded in the accounting records of the beneficiary and determined according to the applicable accounting standards of the country where the beneficiary is established and according to the usual cost-accounting practices of the beneficiary;
- they comply with the requirements of applicable tax and social legislation;
- they are reasonable, justified, and comply with the requirements of sound financial management, in particular regarding economy and efficiency.

The beneficiary's internal accounting and auditing procedures must permit direct reconciliation of the costs and revenue declared in respect of the action with the corresponding accounting statements and supporting documents.

II.14.2 The eligible direct costs for the action are those costs which, with due regard for the conditions of eligibility set out in Article II.14.1, are identifiable as specific costs directly linked to performance of the action and which can therefore be booked to it direct. In particular, the following direct costs are eligible provided that they satisfy the criteria set out in the previous paragraph:

- the cost of staff assigned to the action, comprising actual salaries plus social security charges and other statutory costs included in the remuneration, provided that this does not exceed the average rates corresponding to the beneficiary's usual policy on remuneration.

The corresponding salary costs of personnel of national administrations are eligible to the extent that they relate to the cost of activities which the relevant public authority would not carry out if the project concerned were not undertaken;

- travel and subsistence allowances for staff taking part in the action, provided that they are in line with the beneficiary's usual practices on travel costs or do not exceed the scales approved annually by the EMCDDA;

- the purchase cost of equipment (new or second hand), provided that it is written off in accordance with the tax and accounting rules applicable to the beneficiary and generally accepted for items of the same kind. Only the portion of the equipment's depreciation corresponding to the duration of the action and the rate of actual use for the purposes of the action may be taken into account by the EMCDDA, except where the nature and/or the context of its use justifies different treatment by the EMCDDA;

- costs of consumables and supplies, provided that they are identifiable and assigned to the action;

- costs entailed by other contracts awarded by the beneficiary for the purposes of carrying out the action, provided that the conditions laid down in Article II.9 are met;

- costs arising directly from requirements imposed by the agreement (dissemination of information, specific evaluation of the action, audits, translations, reproduction, etc.), including the costs of any financial services (especially the cost of financial guarantees);

II.14.3 The eligible indirect costs for the action are those costs which, with due regard for the conditions of eligibility described in Article II.14.1, are not identifiable as specific costs directly linked to performance of the action which can be booked to it direct, but which can be identified and justified by the beneficiary using his accounting system as having been incurred in connection with the eligible direct costs for the action. They may not include any eligible direct costs.

By way of derogation from Article II.14.1, the indirect costs incurred in carrying out the action may be eligible for flat rate funding fixed at not more than 7% of the total eligible direct costs. If provision is made in Article I.3.2 for flat rate funding in respect of indirect costs, they need not be supported by accounting documents.

II.14.4 The following costs shall not be considered eligible:

- return on capital;
- debt and debt service charges;
- provisions for losses or potential future liabilities;
- interest owed;
- doubtful debts;
- exchange losses;
- VAT, unless the beneficiary can show that he is unable to recover it according to the applicable national legislation;
- costs declared by the beneficiary and covered by another action or work programme receiving a Union grant;
- excessive or reckless expenditure.

II.14.6 Contributions in kind shall not constitute eligible costs. However, the EMCDDA can accept, if considered necessary and appropriate, that the co-financing of the action referred to in Article I.3.3 should be made up entirely or in part of contributions in kind. In this case, the value calculated for such contributions must not exceed:

- the costs actually borne and duly supported by accounting documents of the third parties who made these contributions to the beneficiary free of charge but bear the corresponding costs;
- the costs generally accepted on the market in question for the type of contribution concerned when no costs are borne.

Contributions involving buildings shall not be covered by this possibility.

In the case of co-financing in kind, a financial value shall be placed on the contributions and the same amount will be included in the costs of the action as ineligible costs and in receipts from the action as co-financing in kind. The beneficiary shall undertake to obtain these contributions as provided for in the agreement.

II.14.7 By way of derogation from paragraph 3, indirect costs shall not be eligible under a project grant awarded to a beneficiary who already receives an operating grant from the EMCDDA during the period in question.

ARTICLE II.15 – REQUESTS FOR PAYMENT

Payments shall be made in accordance with Article I.4 of the Special Conditions.

II.15.1 Pre-financing

Pre financing is intended to provide the beneficiary with a float.

Where required by the provisions of Article I.4 on pre financing, the beneficiary shall furnish a financial guarantee from a bank or an approved financial institution established in one of the Member States of the European Union. The guarantor shall stand as first call guarantor and shall not require the EMCDDA to have recourse against the principal debtor (the beneficiary).

The financial guarantee shall remain in force until final payments by the EMCDDA match the proportion of the total grant accounted for by pre financing. The EMCDDA undertakes to release the guarantee within 30 days following that date.

II.15.2 Further pre-financing payments

Where pre-financing is divided into several instalments, the beneficiary may request a further pre-financing payment once he has used up the percentage of the previous payment specified in the provisions of Article I.4 on further pre-financing. The request shall be accompanied by the following documents:

- a detailed statement of the eligible costs actually incurred;
- where required by the above mentioned provisions of Article I.4, a financial guarantee in accordance with paragraph 1 of this article;
- where required by the above mentioned provisions of Article I.4, a certificate on the action's financial statements and underlying accounts, produced by an approved auditor or in case of public bodies, by a competent and independent public officer;
- any other documents in support of his request that may be required in support of the request for further pre financing payments.

The documents accompanying the request for payment shall be drawn up in accordance with the relevant provisions in Article I.5 and the annexes.

II.15.3 Interim payment

Interim payments are intended to reimburse the beneficiary for expenditure on the basis of a detailed statement of the costs incurred, once the action has reached a certain level of completion. It may clear all or part of any pre-financing.

By the appropriate deadline indicated in Article I.5, the beneficiary shall submit a request for interim payment accompanied by the following documents:

- an interim report on implementation of the action;
- an interim financial statement of the eligible costs actually incurred, following the structure of the estimated budget;
- where required by the provisions of Article I.4 on interim payment, a certificate on the action's financial statements and underlying accounts, produced by an approved auditor or in case of public bodies, by a competent and independent public officer. The certificate shall certify, in accordance with a methodology approved by the

EMCDDA, that the costs declared by the beneficiary in the financial statements on which the request of payment is based are real, accurately recorded and eligible and that all receipts have been declared, in accordance with the agreement.

The documents accompanying the request for payment shall be drawn up in accordance with the relevant provisions in Article I.5 and the annexes. The beneficiary shall certify that the information provided in his request for payment is full, reliable and true. He shall also certify that the costs incurred can be considered eligible in accordance with the agreement, that all receipts have been declared, and that his request for payment is substantiated by adequate supporting documents that can be checked.

On receipt of these documents, the EMCDDA shall have the period specified in Article I.4 in order to:

- approve the interim report on implementation of the action;
- ask the beneficiary for supporting documents or any additional information it deems necessary to allow the approval of the report;
- reject the report and ask for the submission of a new report.

Failing a written reply from the EMCDDA within the time limit for scrutiny indicated above, the report shall be deemed to have been approved. Approval of the report accompanying the request for payment shall not imply recognition of their regularity or of the authenticity, completeness and correctness of the declarations and information they contain.

If additional information or a new report is requested, the time limit for scrutiny shall be extended by the time it takes to obtain this information. The beneficiary shall be informed of that request and the extension of the delay for scrutiny by means of a formal document. The beneficiary shall have the period laid down in Article I.4 to submit the information or new documents requested.

Extension of the delay for approval of the report may delay the payment by the equivalent time.

Where a report is rejected and a new report requested, the approval procedure described in this article shall apply.

In the event of renewed rejection, the EMCDDA reserves the right to terminate the agreement by invoking Article II.11.2(b).

II.15.4 Payment of the balance

Payment of the balance, which may not be repeated, is made after the end of the action on the basis of the costs actually incurred by the beneficiary in carrying out the action. It may take the form of a recovery order where the total amount of earlier payments is greater than the amount of the final grant determined in accordance with Article II.17.

By the appropriate deadline indicated in Article I.5, the beneficiary shall submit a request for payment of the balance accompanied by the following documents:

- a final report on the implementation of the action;
- a final financial statement of the eligible costs actually incurred, following the structure of the estimated budget;
- a full summary statement of the receipts and expenditure of the action;
- where required by the provisions of Article I.4 on payment of the balance, a certificate on the action's financial statements and underlying accounts, produced by an approved auditor, or in case of public bodies by a competent and independent public officer. The certificate shall certify, in accordance with a methodology approved by the EMCDDA, that the costs declared by the beneficiary in the financial statements on which the request of payment is based are real, accurately recorded and eligible and that all receipts have been declared, in accordance with the agreement.

The documents accompanying the request for payment shall be drawn up in accordance with the provisions of Article I.5 and the annexes. The beneficiary shall certify that the information provided in his request for payment is full, reliable and true. He shall also certify that the costs incurred can be considered eligible in accordance with the agreement, that all receipts have been declared, and that his request for payment is substantiated by adequate supporting documents that can be checked.

On receipt of these documents, the EMCDDA shall have the period specified in Article I.4 in order to:

- approve the final report on implementation of the action;
- ask the beneficiary for supporting documents or any additional information it deems necessary to allow the approval of the report;
- reject the report and ask for the submission of a new report.

Failing a written reply from the EMCDDA within the time limit for scrutiny indicated above, the report shall be deemed to have been approved. Approval of the report accompanying the request for payment shall not imply recognition of their regularity or of the authenticity, completeness and correctness of the declarations and information they contain.

If additional information or a new report is requested, the time limit for scrutiny shall be extended by the time it takes to obtain this information. The beneficiary shall be informed of that request and the extension of the delay for scrutiny by means of a formal document. The beneficiary shall have the period laid down in Article I.4 to submit the information or new documents requested.

Extension of the delay for approval of the report may delay the payment by the equivalent time.

Where a report is rejected and a new report requested, the approval procedure described in this article shall apply.

In the event of renewed rejection, the EMCDDA reserves the right to terminate the agreement by invoking Article II.11.2(b).

ARTICLE II.16 – GENERAL PROVISIONS ON PAYMENTS

II.16.1 Payments shall be made by the EMCDDA in euro. Any conversion of actual costs into euro shall be made at the daily rate published in the Official Journal of the European Union or, failing that, at the monthly accounting rate established by the European Commission and published on its website applicable on the day when the payment order is issued by the EMCDDA, unless the Special Conditions of this agreement lay down specific provisions.

Payments by the EMCDDA shall be deemed to be effected on the date when they are debited to the EMCDDA's account.

II.16.2 The EMCDDA may suspend the period for payment laid down in Article I.4 at any time for the purposes of additional checks by notifying the beneficiary that his request for payment cannot be met, either because it does not comply with the provisions of the agreement, or because the appropriate supporting documents have not been produced or because there is a suspicion that some of the expenses in the financial statement are not eligible.

The EMCDDA may also suspend its payments at any time if the beneficiary is found or presumed to have infringed the provisions of the agreement, in particular in the wake of the audits and checks provided for in Article II.19.

The EMCDDA may also suspend its payments:

- if there is a suspicion of irregularity committed by the beneficiary in the implementation of the grant agreement;
- if there is a suspected or established irregularity committed by the beneficiary in the implementation of another grant agreement or grant decision funded by the General Budget of the European Union or by any other budget managed by them. In such cases, suspension of the payments will only proceed where the suspected or established irregularity can affect the implementation of the current grant agreement.

The EMCDDA shall inform the beneficiary as soon as possible of any such suspension by registered letter with advice of delivery or equivalent, setting out the reasons for suspension.

Suspension shall take effect on the date when notice is sent by the EMCDDA. The remaining payment period shall start to run again from the date when a properly constituted request for payment is registered, when the supporting documents requested are received, or at the end of the suspension period as notified by the EMCDDA.

II.16.3 On expiry of the period for payment specified in Article I.4, and without prejudice to paragraph 2 of this Article, the beneficiary is entitled to interest on the late payment at the rate applied by the European Central Bank for its main refinancing operations in euros, plus three and a half points; the reference rate to which the increase applies shall be the rate in force on the first day of the month of the final date for payment, as published in the C series of the Official Journal of the European Union.

Interest on late payment shall cover the period from the final date for payment, exclusive, up to the date of payment as defined in paragraph 1, inclusive. The interest shall not be treated as a receipt for the action for the purposes of determining the final grant within the meaning of Article II.17.4. The suspension of payment by the EMCDDA may not be considered as late payment.

By way of exception, when the interest calculated in accordance with the provisions of the first and second subparagraphs is lower than or equal to EUR 200, it shall be paid to the beneficiary only upon demand submitted within two months of receiving late payment.

II.16.4 The EMCDDA shall deduct the interest yielded by pre-financing which exceeds EUR 50 000 as provided for in Article I.4 from the payment of the balance of the amount due to the beneficiary. The interest shall not be treated as a receipt for the action within the meaning of Article II.17.4.

Where the pre-financing payments exceed EUR 750 000 per agreement at the end of each financial year, the interest shall be recovered for each reporting period. Taking account of the risks associated with the management environment and the nature of actions financed, the EMCDDA may recover the interest generated by pre-financing lower than EUR 750 000 at least once a year.

Where the interest yielded exceeds the balance of the amount due to the beneficiary as indicated in Article II.15.4, or is generated by pre-financing referred to in the previous subparagraph, the EMCDDA shall recover it in accordance with Article II.18.

Interest yielded by pre-financing paid to Member States is not due to the EMCDDA.

II.16.5 The beneficiary shall have two months from the date of notification by the EMCDDA of the final amount of the grant determining the amount of the payment of the balance or the recovery order pursuant to Article II.17, or failing that of the date on which the payment of the balance was received, to request information in writing on the determination of the final grant, giving reasons for any disagreement. After this time such requests will no longer be considered. The EMCDDA undertakes to reply in writing within two months following the date on which the request for information is received, giving reasons for its reply. This procedure is without prejudice to the beneficiary's right to appeal against the EMCDDA's decision pursuant to Article I.8. Under the terms of Union law in this matter, such appeals must be lodged within two months following the notification of the decision to the applicant or, failing that, following the date on which the applicant learned of the decision.

ARTICLE II.17 - DETERMINING THE FINAL GRANT

II.17.1 Without prejudice to information obtained subsequently pursuant to Article II.19, the EMCDDA shall adopt the amount of the final payment to be granted to the beneficiary on the basis of the documents referred to in Article II.15.4 which it has approved.

II.17.2 The total amount paid to the beneficiary by the EMCDDA may not in any circumstances exceed the maximum amount of the grant laid down in Article I.3.3, even if the total actual costs eligible exceed the estimated total eligible costs specified in Article I.3.2.

II.17.3 If the eligible costs when the action ends are lower than the estimated total eligible costs, the EMCDDA's contribution shall be limited to the amount obtained by applying the Union grant percentage specified in Article I.3.3 to the actual eligible costs approved by the EMCDDA.

II.17.4 The beneficiary hereby agrees that the grant shall be limited to the amount necessary to balance the action's receipts and expenditure and that it may not in any circumstances produce a profit for him.

Profit shall mean any surplus of total actual receipts attributable to the action over the total actual costs of the action. The actual receipts to be taken into account shall be those which have been established, generated or confirmed on the date on which the request for payment of the balance is drawn up by the beneficiary for financing other than the Union grant, to which shall be added the amount of the grant determined by applying the principles laid down in paragraphs 2 and 3 of this article. For the purposes of this article, only actual costs falling within the categories set out in the estimated budget referred to in Article I.3.1 and contained in Annex II shall be taken into account; non eligible costs shall always be covered by non-Union resources.

Any surplus determined in this way shall result in a corresponding reduction in the amount of the grant.

II.17.5 Without prejudice to the right to terminate the agreement under Article II.11, and without prejudice to the right of the EMCDDA to apply the penalties referred to in Article II.12, if the action is not implemented or is implemented poorly, partially or late, the EMCDDA may reduce the grant initially provided for in line with the actual implementation of the action on the terms laid down in this agreement.

II.17.6 On the basis of the amount of the final payment determined in this way and of the aggregate amount of the payments already made under the terms of the agreement, the EMCDDA shall set the amount of the payment of the balance as being the amount still owing to the beneficiary. Where the aggregate amount of the payments already made exceeds the amount of the final grant, the EMCDDA shall issue a recovery order for the surplus.

ARTICLE II.18 - RECOVERY

II.18.1 If any amount is unduly paid to the beneficiary or if recovery is justified under the terms of the agreement, the beneficiary undertakes to repay the EMCDDA the sum in question on whatever terms and by whatever date it may specify.

II.18.2 If the beneficiary fails to pay by the date set by the EMCDDA, the sum due shall bear interest at the rate indicated in Article II.16.3. Interest on late payment shall cover the period between the date set for payment, exclusive, and the date when the EMCDDA receives full payment of the amount owed, inclusive.

Any partial payment shall first be entered against charges and interest on late payment and then against the principal.

II.18.3 If payment has not been made by the due date, sums owed to the EMCDDA may be recovered by offsetting them against any sums owed to the beneficiary, after informing him accordingly by registered letter with advice of delivery or equivalent, or by calling in the financial guarantee provided in accordance with Article II.15.1. In exceptional circumstances, justified by the necessity to safeguard the financial interests of the Union, the EMCDDA may recover by offsetting before the due date of the payment. The beneficiary's prior consent shall not be required.

II.18.4 Bank charges occasioned by the recovery of the sums owed to the EMCDDA shall be borne solely by the beneficiary.

II.18.5 The beneficiary understands that under Article 299 of Treaty on the functioning of the European Union, the EMCDDA may adopt an enforceable decision formally establishing an amount as receivable from persons other than States. An action may be brought against such decision before the Court of First Instance of the European Union.

ARTICLE II.19 – CHECKS AND AUDITS

II.19.1 The beneficiary undertakes to provide any detailed information requested by the EMCDDA or by any other qualified outside body authorized by the EMCDDA for the purposes of checking that the action and the provisions of this agreement are being properly implemented.

II.19.2 The beneficiary shall keep at the EMCDDA's disposal all original documents, especially accounting and tax records, or, in exceptional and duly justified cases, certified copies of original documents relating to the agreement for a period of 5 years from the date of payment of the balance specified in Article I.4.

II.19.3 The beneficiary agrees that the EMCDDA may have an audit of the use made of the grant carried out either directly by its own staff or by any other outside body authorized to do so on its behalf. Such audits may be carried out throughout the period of implementation of the agreement until the balance is paid and for a period of 5 years from the date of payment of the balance. Where appropriate, the audit findings may lead to recovery decisions by the EMCDDA.

II.19.4 The beneficiary undertakes to allow EMCDDA staff and outside personnel authorised by the EMCDDA the appropriate right of access to sites and premises where the action is carried out and to all the information, including information in electronic format, needed in order to conduct such audits.

II.19.5 By virtue of Council Regulation (Euratom, EC) No 2185/96 and Regulation (EC) No 1073/1999 of the European Parliament and the Council, the European Anti Fraud Office (OLAF) may also carry out on the spot checks and inspections in accordance with the procedures laid down by Union law for the protection of the financial interests of the European Union against fraud and other irregularities. Where appropriate, the inspection findings may lead to recovery decisions by the EMCDDA.

II.19.6 The European Court of Auditors shall have the same rights as the EMCDDA, notably right of access, as regards checks and audits.

SIGNATURES

For the beneficiary

For the EMCDDA

[name / forename]

Alexis GOOSDEEL

[function]

Head of Unit

Done at [place] on .../.../'07

Done at Lisbon on .../.../'07

in duplicate in English

Annex 1 to the 2010 Reitox grant agreement

Description of the action

I. Introduction

The National Focal Points (NFPs) are the main information interfaces between the MSs and the EMCDDA. It is their task, under Member State (MS) responsibility, to provide the EMCDDA with all information requested within the framework of the Centre's work programmes (WPs) or to satisfy ad hoc requests from policy makers and other key partners of the EMCDDA. EMCDDA quality standards and deadlines have to be respected. NFPs are, together with the EMCDDA, responsible for a broad dissemination at national level of the EMCDDA and REITOX work results.

At national level, each NFP should be the leading body that works closely together with all relevant partners that collect, produce and/or analyse data in the drugs field. NFPs should work closely together with scientists, policy-makers and specialists working in the field. They should closely follow and analyse the scientific, legal and policy developments in their countries.

NFPs play an active role in the development process of the EMCDDA's three-year WPs through the provision of comments and proposals on the objectives and the areas to be covered. They transform the EMCDDA WPs into national NFP-WPs and are responsible for the latter's execution. NFPs are key partners in the conceptualisation of new key indicators and core data sets as well as in the improvement of the existing working areas. The quality level of the outputs of the NFPs and the EMCDDA is to a large extent determined by their active participation in the EU REITOX methodological working groups.

The NFPs, under Member States' responsibility, are responsible for:

- collecting, harmonising and analysing national information according to EMCDDA standards and providing it to the EMCDDA;
- monitoring and analysing national scientific, legal and policy developments;
- coordinating and animating the national drug information network(s);
- participating actively in the EMCDDA tasking processes;
- executing the national REITOX WPs;
- ensuring the production and dissemination of NFPs' outputs nationally.

The NFPs, under EMCDDA guidance, are responsible for:

- cooperating in the improvement of existing EMCDDA working areas;
- cooperating in the conceptualisation of new key indicators and core data sets;
- language checking and proof-reading of EMCDDA products and publications;
- broad dissemination at national level of the EMCDDA and REITOX outputs.

II. Expected outputs for 2010 (for deadlines please refer to Annex III)

The standard delivery expected from each NFP is determined by the 'Operating framework of the Reitox System', adopted by the Centre's Management Board on 17 January 2003, as well as by the Centre's three-year and annual WPs as well as by specific technical guidelines and time schedules. The NFPs participate in the development of all these fundamental documents.

During the execution period of the present grant agreement for an action, each NFP (i.e. the beneficiary of the grant) is requested to produce the following output:

1. Collection and analysis of information at national level in 2010:

- Annual national report;
- Statistical standard tables and structured questionnaires;
- Data requested within the implementation of the epidemiological key indicators;
- Data input into Scientific Based Research Information System and the REITOX extranet;
- Council decision on information exchange, risk assessment and control of new psychoactive substances: early warnings to the EMCDDA;
- Updates regarding national developments, e.g. operational, legal, institutional and political changes and events;
- Review process of national data contained in the EMCDDA draft annual report;
- Press clippings covering major national developments as well as EMCDDA and/or NFP events, e.g. launch of the Annual Report 1;
- Replies to ad hoc requests from the EMCDDA, through Reitox Coordination 1.

2. Dissemination at national level:

- Distribution of EMCDDA reports and other products;
- Council decision on information exchange, risk assessment and control of new psychoactive substances: information from the EMCDDA to national partners;
- Media relations at national level;
- Informing relevant national partners and network(s) about quality feedback provided by the EMCDDA;
- Responding to queries at national level or, where indicated, channelling such requests to the EMCDDA. Being the EMCDDA's 'ambassador' at national level ⁽²⁾;
- Language checking and proof-reading of EMCDDA products ⁽³⁾;

⁽²⁾ When information requested is not readily available, the beneficiary is expected (within the limits of its resources' availability) to make reasonable efforts to obtain this information.

⁽³⁾ The beneficiary is expected to make reasonable efforts in these particular areas, within the limits of its resources' availability.

3. Progress reports on the implementation of:

- The Council decision on information exchange, risk assessment and control of new psychoactive substances at national level.

4. Financial and contractual implementation reports:

- Interim activity report on the implementation of the action between the start of the action until 15 September 2010;
- Interim financial implementation report, covering the period from the start date of the action until 15 September 2010;
- Final activity report on the implementation of the action from the start date until 31 December 2010;
- Final financial implementation report, covering the period from the start date of the action until 31 December 2010;
- Full summary statement of the receipts and expenditure of the action;
- Audit certificate established by a recognised (external) auditor of accounts.

The beneficiary finally also commits him(her)self to participate in meetings and actions organised periodically by the EMCDDA, such as: Heads of REITOX Focal Points meetings, EU REITOX methodological meetings; ad hoc working parties, studies; surveys and pilot projects.

Abbreviations and acronyms

3YWP	EMCDDA's three-year work programme and strategy 2010-12	EWS	Early warning system
BPP	Best practice portal	GPS	General population survey
CUP	Cross-unit project	HBSC	Health behaviour in school-aged children
DDS	Decentralised data system	HSR	Health and social responses
DRD	Drug-related deaths	IDU	Injecting drug use
DRID	Drug-related infectious diseases	NFP	National focal point
DSSR	Drug supply and supply reduction	PDU	Problem drug use
EDDRA	European drug demand reduction action	PDU-R	Problem drug use revised
EC	European Commission	PERK	Prevention evaluation resources kit
EDND	European database on new drugs	RRT	Rapid response team
EIB	Evaluation instruments bank	ST	Standard table
ELDD	European legal database on drugs	TDI	Treatment demand indicator
E-POD	European perspectives on drugs	TOR	Terms of reference
ESPAD	European School Survey Project on Alcohol and Other Drugs	WP	Work programme

European Monitoring Centre for Drugs and Drug Addiction

Work programme 2010

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About the EMCDDA

The European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) is one of the European Union's decentralised agencies. Established in 1993 and based in Lisbon, it is the central source of comprehensive information on drugs and drug addiction in Europe.

The EMCDDA collects, analyses and disseminates factual, objective, reliable and comparable information on drugs and drug addiction. In doing so, it provides its audiences with an evidence-based picture of the drug phenomenon at European level.

The Centre's publications are a prime source of information for a wide range of audiences including policymakers and their advisers, professionals and researchers working in the field of drugs, and, more broadly, the media and general public.